

# PREA Facility Audit Report: Final

**Name of Facility:** J. Reuben Long Detention Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 12/22/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Darla P. O'Connor	<b>Date of Signature:</b> 12/22/2022

AUDITOR INFORMATION	
<b>Auditor name:</b>	O'Connor, Darla
<b>Email:</b>	darla@preaauditing.com
<b>Start Date of On-Site Audit:</b>	11/02/2022
<b>End Date of On-Site Audit:</b>	11/03/2022

FACILITY INFORMATION	
<b>Facility name:</b>	J. Reuben Long Detention Center
<b>Facility physical address:</b>	4150 J Reuben Long Avenue, Conway, South Carolina - 29526
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Lisa Piccone
<b>Email Address:</b>	picconel@horrycountysc.gov
<b>Telephone Number:</b>	8435164514

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Marcus Rhodes
<b>Email Address:</b>	rhodesma@horrycountysc.gov
<b>Telephone Number:</b>	8439156861

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Beth Lawson
<b>Email Address:</b>	elawson@mediko.com
<b>Telephone Number:</b>	8439158934

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	991
<b>Current population of facility:</b>	692
<b>Average daily population for the past 12 months:</b>	665
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Both females and males
<b>Age range of population:</b>	17-74
<b>Facility security levels/inmate custody levels:</b>	minimum to maximum
<b>Does the facility hold youthful inmates?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	281
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	30
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	0

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Horry County Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1301 2nd Avenue, Conway, South Carolina - 29526
<b>Mailing Address:</b>	4150 J Reuben Long Ave., Conway, South Carolina - 29526
<b>Telephone number:</b>	8439155140

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	Sheriff Phillip Thompson
<b>Email Address:</b>	thomps@horrycountysc.gov
<b>Telephone Number:</b>	8439155450

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	Lisa Piccone	<b>Email Address:</b>	picconel@horrycountysc.gov

<b>SUMMARY OF AUDIT FINDINGS</b>	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
<b>Number of standards exceeded:</b>	
3	<ul style="list-style-type: none"> <li>• 115.31 - Employee training</li> <li>• 115.33 - Inmate education</li> <li>• 115.65 - Coordinated response</li> </ul>
<b>Number of standards met:</b>	
42	
<b>Number of standards not met:</b>	
0	

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-11-02
2. End date of the onsite portion of the audit:	2022-11-03

#### 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:	Sea Haven, Inc. Horry County Rape Crisis Center Just Detention International South Carolina Coalition Against Domestic Violence.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	991
15. Average daily population for the past 12 months:	665
16. Number of inmate/resident/detainee housing units:	21

<p><b>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input 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><b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b></p>	<p style="text-align: center;">708</p>
<p><b>37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b></p>	<p style="text-align: center;">4</p>
<p><b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b></p>	<p style="text-align: center;">0</p>
<p><b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b></p>	<p style="text-align: center;">0</p>
<p><b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b></p>	<p style="text-align: center;">0</p>

<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	10
<b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	3
<b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0

<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>Eighteen inmates from targeted groups were interviewed. The Auditor interviewed the following:</p> <ul style="list-style-type: none"> <li>• One youthful inmate</li> <li>• One visually impaired</li> <li>• Ten Lesbian, Gay or Bisexual</li> <li>• One Transgender or Intersex</li> <li>• Five who disclosed abuse during screening</li> </ul> <p>The facility did not have inmates who fell into the following categories</p> <ul style="list-style-type: none"> <li>• Zero physically disabled inmate.</li> <li>• Zero Cognitively disabled inmates.</li> <li>• Zero hearing impaired inmate.</li> <li>• Zero LEP inmates.</li> <li>• Zero inmates in segregation housing for PREA.</li> </ul>
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**Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit**

<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>281</p>
<p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>0</p>
<p><b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>2</p>
<p><b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>The vast majority of volunteers, when utilized, serve in a religious services capacity. The contractors are primarily medical and mental health staff.</p>



# INTERVIEWS

## Inmate/Resident/Detainee Interviews

### Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:

15

54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)

- Age
- Race
- Ethnicity (e.g., Hispanic, Non-Hispanic)
- Length of time in the facility
- Housing assignment
- Gender
- Other
- None

**55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?**

The institutional count the first day of the on-site audit was 708.

Fifteen random inmates were interviewed. These were inmates that were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates from facility to interview, ensuring diversity in age and race.

During the on-site tour, the Auditor had several conversational encounters with inmates regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information gathering process.

As a result of the audit notice posting the Auditor did not receive any correspondence. At the beginning of each interview the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random inmates willing participated in the interview process. All responses were recorded by typing them onto the protocol form.

During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random inmates responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.

<p><b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>According to the PREA Auditor Handbook, the auditor was required to conduct a minimum of fifteen random inmate interviews. The Auditor interviewed fifteen random inmates.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>18</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p><b>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</b></p>	<p>1</p>
<p><b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported zero inmates in this targeted category. During the facility tour the Auditor did not observe any inmates who obviously fell into this category.</p>
<p><b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported zero inmates in this targeted category. During the facility tour the Auditor did not observe any inmates who obviously fell into this category.</p>

<p><b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>1</p>
<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported zero inmates in this targeted category. During the facility tour the Auditor did not observe any inmates who obviously fell into this category.</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported zero inmates in this targeted category. During the facility tour the Auditor did not observe any inmates who obviously feel into this category.</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>10</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>1</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported zero inmates in this targeted category. Inmates who had reported a sexual abuse were no longer in the facility. Through a review of the inmate roster, the Auditor did not see the names of inmates who had reported a sexual abuse.</p>

<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>5</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported zero inmates in this targeted category. Through a review of the inmate roster, the Auditor did not see the names of inmates who had reported a previous or current sexual abuse.</p>
<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>According to the PREA Auditor Handbook, the auditor was required to conduct a minimum of fifteen targeted inmate interviews. The Auditor interviewed eighteen targeted inmates.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>15</p>

<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>From the staff roster, the Auditor chose random staff by excluding any staff who had been identified as specialized and by including staff available the days of the on-site audit.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>22</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>



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

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

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

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

<p><b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b></p>	<p>Using the list of specialized staff provided, the Auditor was able to select individuals for interviews. All specialized staff answers were based on the line of questioning on the specific interview protocols for their position and responsibilities.</p> <p>In several instances a single person was responsible for covering multiple, separate protocols, i.e. First responder/Intermediate or higher staff, Intake staff/Monitor for retaliation, Intake staff/Screening for risk of victimization and abusiveness, etc.</p>
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# SITE REVIEW AND DOCUMENTATION SAMPLING

## Site Review

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

<p><b>84. Did you have access to all areas of the facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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### Was the site review an active, inquiring process that included the following:

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

**89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).**

The Horry County Sheriff's Office assumed control of J. Reuben Long Detention Center on July 1, 1999 from the Horry County Government. Since that time, J. Reuben Long Detention Center's goal has been to create safer communities through secure custodial supervision of inmates. This is accomplished by engaging in collaborative partnerships with the Horry County Criminal Justice System that affords inmates the chance to become productive citizens of their community after their re-entry into society.

The JRLDC is a co-ed minimum, medium, and maximum-security facility that provides direct supervision for all inmates. The total rated facility capacity is for 991 inmates and the total population on the day of the on-site review was 708. The age range of the population is currently 17-74. JRLDC has a statutory obligation to house 17-year-old inmates as adults in their facility under South Carolina Code of Laws. However, the facility maintains sight and sound separation from adult inmates 18 years and older by housing these youthful inmates in a dedicated, separate housing unit (A-3). More information on how this is accomplished can be found in the body of standard § 115.14 Youthful Inmates.

The J. Reuben Long Detention Center does not contract with other facilities for the confinement of inmates and does not detain solely for immigration purposes.

The main entrance to the facility allows for the screening of all visitors, both inmate and professionals, who enter the facility. As guests arrive at the J. Reuben Long Detention Center, the Lobby Security Officer greet them. The Lobby is open, generally, from 7:00 a.m. to 7:00 p.m. daily. These officers assist friends and family members with viewing bond hearings, transferring of inmate property, and another general question or concerns, as necessary.

All guests that enter the detention center property are subject to the Laws, Rules and Regulations of the State of South Carolina and

Horry County Government. This includes but is not limited to the department's right to search all visitor's persons, packages, and vehicles. All visitors and their property are screened by metal detector and x-ray for weapons and contraband.

Visitation Officers are assigned under the Administrative division and assist guests with video visitation with inmates that are housed at the facility. Magistrate bond court (first appearance) is held on site where the Magistrate maintains an office adjacent to the booking area.

The administrative offices, training, and staff lounge are not accessible by the community and electronic access is controlled through key card systems.

The JRLDC is 4 buildings, operates 5 single cell housing units, 10 multiple occupancy housing units, 6 open bay housing units and has a total of 56 segregation cells available for disciplinary and administrative housing. The Auditor toured the housing units which include single and double cell tiers as well as some dormitory style housing. Housing is primarily comprised of multi-floor dorm-style housing units, each containing single-bunks and single-inmate toilets and showers. All of the facility's 21 housing units contain a self-contained, directly supervised day room. In these units, telephones, televisions and kiosks are available for inmates to use. Inmates receive meals, commissary, pill pass, library services, programming and religious services, etc. in the housing units and only leave outside the units for court appearances and outside medical appointments.

The Auditor toured the Disciplinary Restricted Housing Unit and Administrative Restrictive Housing Unit. These units are celled housing, with toilet/sink fixtures in each cell. Single stall showers are available outside of the cells. Inmates are housed based on disciplinary segregation and administrative restrictive housing for exhibiting behaviors which are deemed non-compliant for general population housing, or those who pose a

threat to themselves or others in the general population.

The annex is used to house inmates sentenced to 90 days or less that do not qualify for transfer to the SC DOC under state guidelines. These inmates have been classified as low-risk and are housed in this area as they complete programming. There are two open bay dormitories in the annex. The Auditor was permitted to move freely about the housing unit and also entered the unoccupied shower/toileting area for observation purposes. There were no limited privacy concerns observed in the annex, appropriate signage was posted, and the inmates were involved with program course requirements while the Auditor was on the unit.

The Auditor also toured the annex, laundry, and kitchen facilities. Toured areas also included all 21 of the housing units (including restricted and segregated housing units), medical clinic, dental suite, nursing staff offices, pharmacy, visiting areas, barber shop, commissary, religious services, legal and leisure libraries, intake processing, property area, main control, recreation yards, security staff offices, administrative offices, etc.

During the tour, Auditor asked impromptu questions of staff and inmates, noted the placement and coverage of surveillance cameras, inspected surveillance monitors, identified potential blind spots, inspected bathrooms and showers to identify potential cross gender viewing concerns, etc. Inmates were observed to be under constant supervision of the staff while outside of their rooms/bunk areas and involved in various activities. The facility was clean, well maintained and well-staffed.

In inmate work areas, the Auditor assessed the level of staff supervision and asked questions to determine whether inmates are in lead positions over other inmates. Auditor also noted the placement of PREA information posters, and noted the placement of the PREA audit notice provided to the facility.



During the tour, the Auditor utilized the inmate phone system to facilitate a call to the Hotline Services number for reporting. All phones tested were functioning appropriately. The hotline is provided in both English and Spanish and the facility offers a language line for diverse populations and interpreting. The facility utilizes the KIOSK system to report grievances and the informal inmate interviews indicated knowledge of utilizing this system in both Spanish and English. Every housing unit has a kiosk available for reporting. The Auditor was provided private interview accommodations for all types of interviews.

## Documentation Sampling

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

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

Yes

No

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

**Personnel and Training Files:**

The PAQ reflects 281 facility staff. A total of fifty record reviews were conducted on staff from various categories. The records were selected by randomly choosing the records of new hires; newly promoted employees and seasoned employees.

All records contained the required documentation, i.e., initial criminal history check, administrative adjudication, initial PREA education with acknowledgment form signed, PREA annual training and five-year criminal history check, when applicable.

**Inmate Records:**

There were fifty inmate records, chosen randomly from the master roster, with varying arrival dates. All records had a signed acknowledgment sheet, had received PREA information and viewed the PREA video. All fifty inmates had received PREA information during intake, had their PREA screening within 72 hours of admission, and had comprehensive PREA education within 30-days of intake.

**Sexual Abuse and Sexual Harassment Allegations:**

According to the PAQ, the facility reported four allegations of sexual abuse and one allegation of sexual harassment in the past twelve months.

The Auditor was provided the incident report and the investigative report for each of the allegations.

All five reports were reviewed using the PREA audit investigative records review tool to record the following information relative to each investigative report:

- Case# / ID
- Date of Allegation
- Date of Investigation
- Staff-or-Inmate-on-Inmate
- Sexual Abuse or Sexual Harassment
- Final Disposition
- Is Disposition Justified?
- Investigating Officers
- Notice Given to Inmate

Investigation Files:

Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past twelve-months, five total allegations of sexual abuse (four) and sexual harassment (one) were received.

The Auditor completed a document review of the PREA allegations, investigations and findings. All allegations were investigated administratively. None of the allegations were investigated criminally. Of the five allegations, four were sexual abuse allegations with one being sexual harassment. Three were inmate-on-inmate sexual abuse allegations. One was a staff-on-inmate sexual abuse allegation. The sexual harassment was inmate-on-inmate. After investigation all five allegations were deemed to be unfounded. At the time of the on-site audit all cases had been investigated and closed.

There were zero inmates transported for forensic examinations in the past twelve months. This was confirmed by the PCM as well as SANE personnel.

The institution staff I encountered were bright and engaging. Their combined demeanors and attitudes displayed a culture that is acutely aware of the importance of sexual safety and view the responsibility to protect inmates and staff from sexual victimization as a high priority.

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

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	3	0	3	0
<b>Staff-on-inmate sexual abuse</b>	1	0	1	0
<b>Total</b>	4	0	4	0

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

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

## **Sexual Abuse and Sexual Harassment Investigation Outcomes**

### **Sexual Abuse Investigation Outcomes**

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

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

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

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

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

**Sexual Harassment Investigation Outcomes**

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

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

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

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

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

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

**Sexual Abuse Investigation Files Selected for Review**

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

4

<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>3</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>



<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
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**Sexual Harassment Investigation Files Selected for Review**

<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
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<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
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**Inmate-on-inmate sexual harassment investigation files**

<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
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<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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## Staff-on-inmate sexual harassment investigation files

<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	All sexual abuse and sexual harassment files from the previous twelve months were reviewed by the auditor.

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

<b>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
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## Non-certified Support Staff

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

Yes

No

## AUDITING ARRANGEMENTS AND COMPENSATION

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

The audited facility or its parent agency

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

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

Other

## **Standards**

### **Auditor Overall Determination Definitions**

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

### **Auditor Discussion Instructions**

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

<p><b>115.11</b></p>	<p><b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> <li>• JRLDC Policies and Procedures, Chapter 500: Inmate Discipline Policy 108.0, Prison Rape Elimination Act, revised 3/1/2021</li> <li>• JRLDC Organizational Chart</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> </ul> <p>Provision (a):</p> <p>The Pre-Audit Questionnaire (PAQ) indicates the facility has zero-tolerance as it relates to all forms of sexual abuse or sexual harassment in the institution, as well as any contracts over which it has control. The PAQ states the policy outlines how the facility will implement prevention, detection and response to sexual abuse and sexual harassment. It further asserts the policy includes clear definitions of prohibited behaviors and approved sanctions for participation in those behaviors.</p> <p>JRLDC Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, mandates an agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.</p> <p>Definitions can be found in JRLDC Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 2-3, 6, A-H.</p> <p>Disciplinary sanctions can be found in JRLDC Policies and Procedures, Chapter 500: Inmate Discipline Policy 108.0, Prison Rape Elimination Act, revised 10/18/2019.</p> <p>Provision (b):</p> <p>JRLDC Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, effective revised 4/20/2020, specifically addresses the requirements of this provision. Additionally, it identifies the role of the PREAS Coordinator and PREA Compliance Manager. The reviewed policy is</p>
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consistent with the PREA Standards and outlines the agency's approach to sexual safety.

JRLDC has 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. The positions and hierarchy within JRLDC for PREA personnel was confirmed through a review of the agency PREA organizational chart.

Provision (c)

JRLDC Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, effective revised 4/20/2020, establishes, identifies, and outlines the roles and responsibilities of the PCM, which includes the collaboration with various levels of institutional management. Further, it establishes and identifies the responsibilities and procedures for the PCM to coordinate the institutions efforts to comply with PREA standards. Each of the reviewed policies is consistent with PREA standards and outlines the agency's approach to sexual safety.

JRLDC Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, effective revised 4/20/2020, mandate the Detention Center Director will designate an employee with sufficient time and authority to develop, implement, manage, and oversee efforts to address the requirements contained in the PREA Standards. According to the JRLDC Organizational Chart the PREA Coordinator will report directly to the Detention Center Director for all matters related to PREA abuse and sexual harassment.

Conclusion:

Based upon the review and analysis of the available documentation, the Auditor has determined the facility is compliant with every provision of the standard relating to zero-tolerance policy toward sexual abuse and sexual harassment and the designation of an Agency PREA Coordinator.

**115.12**

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

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, effective January 1, 2018
- JRLDC Policies and Procedures, Chapter 100: Agency Administration, Management and Training Policy 105.0, Employee Training Requirements/ Training Records, effective January 1, 2018
- Next Step Program Contract with JRLDC, which is in place until February 28, 2023.
- JRLDC Memorandum of Agreement with South Carolina Department of Juvenile Justice (SCDJJ), effective fiscal year 2022-2023.
- Contract between SC Mental Health Department and JRLDC, effective October 1, 2022 to September 30, 2023
- Contract between Horry County Council and Sea Haven, Inc., effective until June 30, 2023

Interviews:

- Facility Head - Detention Center Director

Provision (a):

The Pre-Audit Questionnaire (PAQ) indicates the agency has entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later. The agency has entered into four contracts or contract renewals for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later. All contracts require contractors to adopt and comply with PREA standards

Provision (b):

According to the PAQ, all contractors are required to undergo PREA training and comply with all PREA requirements.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses contracting with other entities for the confinement of inmates. No recommendations or corrective action is required

**115.13 Supervision and monitoring**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 500: Inmate Discipline Policy 108.0, Prison Rape Elimination Act, revised 3/1/2021
- JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Policy 102.0 Staffing Plans, revised September 16, 2022
- Facility Staffing Plan

Interviews:

- Facility Head - Detention Center Director

Provision (a):

According to the PAQ, the agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse.

On the PAQ, the facility indicated they have a staffing plan, and the plan addresses each of the thirteen items listed in this provision. In addition, the facility staffing plan indicates it is the policy of the facility to ensure that all relieved posts are staffed at the times specified.

The PAQ confirms the average daily number of inmates during the past 12 months has been 665. The average daily number of inmates on which the staffing plan was predicated is 665.

Provision (b):

According to the PAQ, the agency requires the facility to document and justify all deviations from the staffing plan. The facility reported zero deviations from the staffing plan in the past twelve months. This was confirmed by the Detention Center Director.

Provision (c):

Per the PAQ, at least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed



to:

1. the staffing plan,
2. the deployment of monitoring technology, or
3. the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan

Provision (d):

Per the PAQ, the facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Policy 102.0 Staffing Plans, revised September 16, 2022, p. 7, procedure #5, C, addresses this requirement.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses contracting with other entities for the confinement of inmates. No recommendations or corrective action is required.

**115.14 Youthful inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 3/Classification: Inmate Classification Plan Policy 300.0, revised May 30, 2015

Interviews:

- Facility Head - Detention Center Director

Provision (a):

The Pre-Audit Questionnaire (PAQ) indicates the facility does house youthful inmates. In interviews with the Detention Center Director, it was confirmed the facility does house youthful inmates.

Provision (b):

According to the PAQ, the facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas outside housing unit. JRLDC Policies and Procedures, Chapter 3/Classification: Inmate Classification Plan Policy 300.0, revised May 30, 2015, p. 2, Procedure #1, A, 4, addresses this requirement for youthful offenders.

The PAQ also indicates the agency always provides direct staff supervision in areas outside housing units where youthful inmates have sight, sound, or physical contact with adult inmates. JRLDC Policies and Procedures, Chapter 3/Classification: Inmate Classification Plan Policy 300.0, revised May 30, 2015, p. 2, Procedure #1, A, 4, and p. 8, Attachment A addresses this requirement for youthful offenders.

Provision (c):

The PAQ indicates the facility documents the exigent circumstances for each instance in which youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities was denied. JRLDC Policies and Procedures, Chapter 3/Classification: Inmate Classification Plan Policy 300.0, revised May 30, 2015, pp. 3-4, Procedure #2, B, 3, a-c, addresses this requirement.

The PAQ indicated in the past twelve months, zero youthful inmates have been placed in isolation to separate them from adult inmates.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses youthful inmates. No recommendations or corrective action.

**115.15 Limits to cross-gender viewing and searches**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter Intake/Booking: Body Cavity Searches Policy 205.0, revised May 30, 2015
- JRLDC Policies and Procedures, Chapter Intake/Booking: Strip Searches Policy 204.0, revised November 1, 2015
- JRLDC Policies and Procedures, Chapter Intake/Booking: Pat Searches Policy 203.0, revised May 30, 2015
- JRLDC Policies and Procedures, Chapter 700 Security: Supervision Rounds and Counts Policy 700.0, revised April 20, 2020

Interviews:

- Facility Head - Detention Center Director
- PREA Coordinator (PC)

Provision (a):

The Pre-Audit Questionnaire (PAQ) indicates the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates. This was confirmed by the Detention Center Director, through the interview process.

According to the PAQ, in the past 12 months, there were zero cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff.

JRLDC Policies and Procedures, Chapter Intake/Booking: Strip Searches Policy 204.0, revised November 1, 2015 and JRLDC Policies and Procedures, Chapter Intake/Booking: Body Cavity Searches Policy 205.0, revised May 30, 2015, confirms this information. And outlines the parameters of strip searches and body cavity searches.

Provision (b):

According to the PAQ, the agency/facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. JRLDC Policies and Procedures, Chapter Intake/Booking: Pat Searches Policy 203.0, revised May 30, 2015, p.2, Procedure #2, documents this.

The PAQ indicates the facility does not restrict female inmates' access to regularly

available programming or other out-of-cell opportunities to comply with this provision. Through the interview process the PC indicated the facility does not restrict, because we can always comply. There aren't times when we don't have a female officer available to search a female.

The PC indicated there were zero pat-down searches of female inmates that were conducted by male staff during the past twelve months.

Provision (c):

The PAQ indicates the facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.

Cross gender strip search and body cavity searches are prohibited. Body Cavity Searches are with a search warrant, and only allow cross gender medical practitioners present. This is documented in JRLDC Policies and Procedures, Chapter Intake/Booking: Body Cavity Searches Policy 205.0, revised May 30, 2015, p. 2, Procedure #6 and JRLDC Policies and Procedures, Chapter Intake/Booking: Strip Searches Policy 204.0, revised November 1, 2015, p. 2, Procedure #1. B. 1.

The PAQ indicates facility policy requires that all cross-gender pat-down searches of female inmates be documented. This is chronicled in JRLDC Policies and Procedures, Chapter Intake/Booking: Pat Searches Policy 203.0, revised May 30, 2015, p. 2, Procedure #2.

Provision (d):

The PAQ reflects the facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. JRLDC Policies and Procedures, Chapter 700 Security: Supervision Rounds and Counts Policy 700.0, revised April 20, 2020, p. 4. Procedure #1, E, 1-2 details this requirement.

The PAQ indicates policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 7, Procedures #5, D

JRLDC Policies and Procedures, Chapter 700 Security: Supervision Rounds and Counts Policy 700.0, revised April 20, 2020, p. 4, Procedure #1, E,

Provision (e):

The PAQ reflects that the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

Provision (f):

The PAQ reflects 100% of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

The Auditor reviewed the training attendance sheet, as well as the training curriculum. The curriculum was consistent with the requirements of this provision. The attendance sheet reflected 100% attendance of all security staff.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses limits to cross gender viewing and searches. No recommendations or corrective action.

115.16	<p data-bbox="252 107 1374 197"><b>Inmates with disabilities and inmates who are limited English proficient</b></p> <p data-bbox="252 232 983 268"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 309 558 344"><b>Auditor Discussion</b></p> <p data-bbox="252 385 632 421">Documentation Reviewed:</p> <ul data-bbox="331 488 1481 775" style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> <li>• Language Line Services Inc. Agreement for Language Line Interpreter Services with J. Reuben Long Detention Center dated September 18, 2008.</li> <li>• PREA Language Interpretation Refresher Training</li> </ul> <p data-bbox="252 815 414 851">Interviews:</p> <ul data-bbox="331 913 941 990" style="list-style-type: none"> <li>• Facility Head - Detention Center Director</li> <li>• PREA Coordinator (PC)</li> </ul> <p data-bbox="252 1030 443 1066">Provision (a):</p> <p data-bbox="252 1106 1481 1223">The PAQ indicates the agency has established procedures to provide disabled inmates 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.</p> <p data-bbox="252 1263 1407 1339">Through the interview process, the PC indicated if there is ever a situation that is outside of our scope, we reach out to our county-wide ADA Coordinator.</p> <p data-bbox="252 1379 443 1415">Provision (b):</p> <p data-bbox="252 1456 1445 1608">The PAQ reports the agency has established procedures to provide inmates with limited English proficiency 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.</p> <p data-bbox="252 1648 1388 1765">Through the interview process the PC reported the facility is in the process of translating all Orientation Documents and the Inmate Handbook with a certified translator.</p> <p data-bbox="252 1805 443 1841">Provision (c):</p> <p data-bbox="252 1881 1481 2074">The PAQ indicates agency policy prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations. This is detailed in JRLDC Policies and Procedures, Chapter</p>
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100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 6, Procedure #4, B, 4.

The PAQ indicates the facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used. In the past 12 months, there were zero instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations. This was confirmed by the PC and the Detention Center Director.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses inmates with disabilities and inmates who are limited English proficient. No recommendations or corrective action.



**115.17 Hiring and promotion decisions**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015

Interviews:

- Human Resources Staff

Provision (a):

The PAQ reported two-hundred-eighty-one staff, with sixty-nine new hires, thirty contractors and zero volunteers. Volunteers have not been utilized by the facility since March 2020 due to COVID-19 guidelines and directives.

The PAQ indicates that agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who:

1. 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);
2. 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; or
3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

This requirement is sited in JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015, p. 2, Procedure #2, B, 1, a.

The Auditor reviewed a random sampling of staff and contractor files. Each of the records reviewed contained all items required by the standard, which included documentation and Criminal History Check information. The Auditor was able to verify all records reviewed contained all items required by the standard, including PREA documentation and verification of the completed criminal history checks.

Provision (b):

The PAQ states agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. This is detailed in JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015, p. 2, Procedure #2, B, 1, b.

The Auditor interviewed the Human Resource Staff (HRS) regarding the hiring practices of the facility. The HRS indicated the potential hire is required to fill out the personnel documents, which require the disclosure of the standard required items. The HRS stated the facility takes a very active stance with the requirements of the PREA standards and have developed a very comprehensive system of tracking to ensure that all the required history checks are completed for pre-hires, promotions, and five-year reviews.

The Auditor conducted a review of the requested personnel files and verified that all the files reviewed contained all items required by the standard, including the PREA documentation and verification of the completed criminal history checks. The three questions listed under Provision (a) were asked and answered on all documents as required by the standard.

Provision (c):

The PAQ reveals that agency policy requires that before it hires any new employees who may have contact with inmates, it conducts criminal background record checks, and consistent with federal, state, and local law, makes 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. This is detailed in JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015, p. 2, Procedure #2, B, 1, c.

According to the PAQ, in the past twelve months, forty-eight persons were hired, who may have contact with inmates, who have had criminal background record checks.

Provision (d):

The PAQ indicates agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates.

Provision (d) is detailed in JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015, p. 2, Procedure #2, B, 1, d.

In the past 12 months, there was one contract for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. Through the interview process, the Detention Center Director

explained Mediko Inc. is the contracted medical agency for the facility.

Provision (e):

Per the PAQ, agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates, or that a system is in place for otherwise capturing such information for current employees. This is captured in JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015, p. 2, Procedure #2, B, 1, e.

Provision (f):

According to the PAQ, the agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written application or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct. This information was verified during the interview process with human resources staff.

Provision (g):

The PAQ indicates agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. This is detailed in JRLDC Policies and Procedures, Chapter Administrative/Management, Policy 110.0, Employment Requirements and Records, revised 5/30/2015, p. 2, Procedure #2, B, 1, g.

Provision (h):

Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee on receiving a request from an institutional employer for whom such employee has applied to work. This information was verified during the interview process with Human Resources Staff.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses hiring and promoting decisions. No recommendations or corrective action.

**115.18 Upgrades to facilities and technologies**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Facility Head - Detention Center Director
- PREA Coordinator (PC)

Provision (a):

The PAQ reported the agency/facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later. This information was confirmed by the PC.

The Auditor interviewed the Detention Center Director who reported any construction, renovation or modification would be done with full consideration of all PREA standards. Further there are meetings that would be held regarding any building or construction considerations and that safety and cameras, or other technologies would be discussed and considered at such meetings. During these meetings the executive staff would meet with all key supervisors and managers to discuss any pertinent issues, such as Data/Reporting issues, Grievances, Disciplinary Reviews, Video Summary Reviews, Use of Force Incidents, Incidents of Sexual Abuse, as well as the analysis of key data such as overtime, leave time, morale, etc.

Provision (b):

The PAQ indicates the agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.

The PC confirmed there was a facility wide camera upgrade in 2020

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding upgrades to facility and technology. No recommendations or corrective action.

**115.21**

**Evidence protocol and forensic medical examinations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- Horry County Sheriff Office (HCSO) Policies and Procedures, Chapter 300.00, Property and Evidence Handling, Policy 318.0, effective July 1, 2022

Interviews:

- Random Staff
- SAFE/SANE Staff
- Detention Center Director
- PREA Coordinator (PC)

Provision (a):

The PAQ indicates the agency/facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). Likewise, the agency/facility is responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).

The PAQ reports if another agency has responsibility for conducting either administrative or criminal sexual abuse investigations, the name of the agency that has responsibility. According to the PAQ, this would only potentially happen in cases of criminal sexual abuse by staff members.

The PAQ revealed when conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol.

This provision is outlined in HCSO Policies and Procedures, Chapter 300.00, Property and Evidence Handling, Policy 318.0, effective July 1, 2022.

The Auditor interviewed random staff regarding the rules of evidence, and their understanding of the process should an inmate report alleged sexual abuse. Staff were able to articulate the basic preservation of evidence component of both victim and abuser. They were also able to explain their responsibilities up to the point when they transfer responsibility to either investigative or medical staff.

Provision (b):

According to the PAQ, the protocol was adapted from or otherwise based on the most recent edition of the DOJ'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.

This provision is detailed in HCSO Policies and Procedures, Chapter 300.00, Property and Evidence Handling, Policy 318.0, effective July 1, 2022, p. 13, Procedure #5, R, 1.

Provision (c):

The PAQ indicates the facility offers all inmates who experience sexual abuse access to forensic medical examinations. However, the facility does not offer forensic medical examinations onsite.

Through the interview process, The PC indicated the facility offers all inmates who experience sexual abuse access to forensic medical examinations at an outside facility. Forensic medical examinations are conducted at a Conway Medical Center, 300 Singleton Ridge Rd, Conway, SC 29526; (843) 347-7111.

Additionally, according to JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 12-16, Procedure #11, B, 3, forensic medical examinations are offered without financial cost to the victim.

Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

According to the PAQ, there were zero forensic medical exams conducted during the past twelve months.

SAFE/SANE personnel reported SANE personnel are available 24/7/365; however, if unforeseen circumstances arise and SANE personnel cannot perform the exam, an ER physician and ER registered nurse with a minimum of two hours of forensic evidence collection training may perform the exam. The exam starts with explanation of the exam and written consent from the patient. From there the SANE will gather demographic information and past medical and surgical history. Details of the assault will be documented in the patient's words in the forensic medical record. After all information is obtained, the SANE will do a head- to-toe assessment, document trauma, and take photographs with the patient's consent. A detailed genital exam will be done with the use of high-resolution digital imaging with the patient's consent. Forensic evidence is collected in conjunction with the head-to-toe assessment and genital assessment. Evidence is packaged and secured while maintaining chain of custody until it can be released to law enforcement. After the exam, the SANE will discuss prophylaxis medication to prevent sexually transmitted infections, including HIV. If the patient is female, the SANE will also discuss emergency contraception options.

The SAFE/SANE representative confirmed the examinations are provided at no cost to

the inmate and that all forensic services are provided when the inmate alleges sexual abuse, sexual assault, or sexual battery. All forensic examinations consist of an assessment, documentation, and collection of evidence as outline in the Attorney General's "Adult and Child Sexual Assault Protocols: Initial Forensic Physical Examination.

Provision (d):

During the interview with the PC, it was indicated victim advocacy services are offered through Horry County Rape Crisis Center, website <http://victimtosurvivor.org/>. This is under a county wide agreement. During the examination, the inmate meets the victim advocate and arrangements are made to provide any necessary and/or requested counseling services. Follow-up counseling is coordinated through the Horry County Rape Crisis Center, in collaboration with mental health services.

Provision (e)

As stated in Provision (d) during the examination, the inmate meets the victim advocate. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/or requested.

Provision (f)

The PAQ indicates the agency/facility is responsible for conducting administrative and criminal sexual abuse investigations. This was confirmed by the Detention Center Director as well as the PC.

Provision (g)

Auditor is not required to audit this provision.

Provision (h)

N/A - The facility confirmed there is a county wide agreement for victim advocacy services with Horry County Rape Crisis Center.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding evidence protocol and forensic medical examinations. No recommendations or corrective action.

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Random Staff</li> <li>• Investigative Staff</li> </ul> <p>Provision (a):</p> <p>The PAQ indicates the agency/facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). Likewise, the agency/facility is responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).</p> <p>The PAQ reports if the agency is not responsible for conducting administrative or criminal investigations of alleged sexual abuse, and another state entity has that responsibility, this other entity has a policy governing how such investigations are conducted. According to the PAQ, this would only potentially happen in cases of criminal sexual abuse by staff members.</p> <p>Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past twelve-months, five total allegations of sexual abuse (four) and sexual harassment (one) were received.</p> <p>The Auditor completed a document review of the PREA allegations, investigations and findings. All allegations were investigated administratively. None of the allegations were investigated criminally. Of the five allegations, four were sexual abuse allegations with one being sexual harassment. Three were inmate-on-inmate sexual abuse allegations. One was a staff-on-inmate sexual abuse allegation. The sexual harassment was inmate-on-inmate. After investigation all five allegations were deemed to be unfounded. At the time of the on-site audit all cases had been investigated and closed.</p> <p>There was a total of zero forensic examinations performed by SAFE/SANE certified individuals.</p> <p>All staff interviewed knew their responsibility to report any suspicion, or knowledge of</p>



an allegation of sexual abuse and sexual harassment. Each reported they were required to make such a report immediately after becoming aware of it. They further stated they are to immediately report to their shift supervisor.

Provision (b):

The PAQ indicates the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. This provision is detailed in J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 13-15, Procedure #10.

The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means. The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal prosecution.

Provision (c)

As stated in Provision (a) the agency and facility conduct administrative and criminal investigations.

Provision (d)

Auditor is not required to audit this provision

Provision (e)

Auditor is not required to audit this provision

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies to ensure referral of allegations for investigations. No recommendations or corrective action.

**115.31 Employee training**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Administration/Management 111.0, Employee Training/Records, revised 5/30/2020
- JRLDC PREA Facility Coordinated Response Plan, Officer, undated
- JRLDC PREA Facility Coordinated Response Plan, Supervisor, undated
- JRLDC PREA Refresher: PREA Basics
- JRLDC PREA Refresher: Handling Disclosures of Abuse, undated
- JRLDC PREA Refresher: Professional Communication and Boundaries, undated
- JRLDC PREA Refresher: Duty to Report: Knowledge, suspicion or Information, undated
- JRLDC PREA Refresher: First Responders, undated
- JRLDC PREA Refresher: Securing the Crime Scenes, undated
- JRLDC PREA Refresher: Helping Inmates who primarily Speak another Language, undated
- JRLDC PREA Refresher: Completing a PREA Incident Report

Interviews:

- Random Staff

Provision (a):

The PAQ indicates the agency trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 5, Procedure #4, A, 1, a.

The PAQ further indicates the agency trains 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.

The facilities curriculum and training materials were reviewed by the Auditor. The core training materials contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the employee's classification with specialized training

curriculum depending on the employee's job responsibilities.

The curriculum includes, but is not limited to:

1. Zero tolerance policy
2. How to fulfill responsibilities for sexual abuse and sexual harassment prevention, detection, reporting and response
3. Inmate's right to be free from sexual abuse and sexual harassment
4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
5. The dynamics of sexual abuse and sexual harassment in confinement
6. Common reactions of sexual abuse and sexual harassment victims
7. How to detect and respond to signs of threatened or actual sexual abuse
8. How to avoid inappropriate relationships with inmates
9. How to communicate effectively with LGBTI and gender non-conforming inmates
10. How to comply with relevant mandatory reporting laws
11. The common characteristics of victims and predators, sometimes referred to as red flags

The Auditor reviewed staff training records, for staff from various categories. Each reviewed file contained all relevant documentation to reflect the staff had met their initial PREA requirements. In addition, the Auditor reviewed all the sign-in sheets for PREA training for the past twelve months which confirmed by staff signatures, each of the employees at the facility had acknowledged receiving the PREA training.

Each of the staff interviewed recalled attending the initial PREA training when they were hired. All staff interviewed confirmed they participate in annual PREA training, in-service PREA training, as well as additional shift turnout training.

This provision is addressed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 5, Procedure #4, A, 1, a.

Provision (b)

The PAQ indicated the training provided by the agency, addresses both male and female issues. The facility training has been tailored specifically to their respective male and female inmate population. The Auditor reviewed the training materials utilized for the facility staff. The training materials are consistent with this PREA standard. If an employee is reassigned from a facility that houses a different population composition, that employee is retrained or provided refresher training for the population make-up of the new facility prior to being placed in contact with the inmate population. The training curriculum did include training specific to transgender inmates.

As stated in Provision (a), the Auditor reviewed documentation for the training that occurred at the facility, verifying attendance of facility staff.

This provision is covered in detail in JRLDC Policies and Procedures, Administration/Management 111.0, Employee Training/Records, revised 5/30/2020.

Provision (c)

The Auditor reviewed documentation that reflected all 100% of the staff have received the PREA training in the past twelve months. Facility staff also receive refresher training every two years. The Auditor reviewed documents of the last refresher training in fiscal year 2021. The annual PREA training was conducted in the fiscal year 2021. The facility provides additional PREA training annually, as well as shift trainings, staff meetings, educational materials, and posters.

Provision (d)

PREA training requirements mandate attendance at all PREA required training to be documented through employee signature, acknowledging the training they have received. In some instances, employees are required to complete an Acknowledgement of Receipt of Training upon completion of the training. Copies of these receipts were observed in every file reviewed by the Auditor. The receipts contained various dates which reflected separate training sessions.

In instances where a receipt of training material was not required, staff would sign-in on a training sheet, verifying their attendance at the required training. The Auditor viewed copies of each training session for the past twelve months, reflecting training completed by facility staff.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility exceeds the standard which addresses policies regarding employee training. No recommendations or corrective action.

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<p data-bbox="256 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 632 374">Documentation Reviewed:</p> <ul data-bbox="331 443 1469 600" style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p data-bbox="256 642 416 676">Interviews:</p> <ul data-bbox="331 745 517 779" style="list-style-type: none"> <li>• Contractor</li> </ul> <p data-bbox="256 822 443 855">Provision (a):</p> <p data-bbox="256 891 1469 1216">The PAQ indicates all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 5, Procedure #4, A, 1, a.</p> <p data-bbox="256 1258 1469 1370">The PAQ further indicates thirty contractors and volunteers, who may have contact with inmates, have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response:</p> <p data-bbox="256 1413 1469 1648">The Auditor conducted two formal interviews with contract staff members. The contractors recalled having PREA training, stating it was specific to his roles or responsibilities in the facility. When the Auditor questioned them about their knowledge of PREA, they were able to identify what PREA was and more importantly, what their role or responsibility was in the event they were confronted with a situation of Sexual Abuse or Sexual Harassment.</p> <p data-bbox="256 1691 443 1724">Provision (b):</p> <p data-bbox="256 1767 1469 2092">The PAQ indicates the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This is addressed in detail in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 3, definition #7; p. 10, procedure #9, B, 1-9; p. 12, F, 1-2; pp. 12-13, G, 1-2; p. 18, B,</p>

1-3.

Provision (c):

As indicated in Provision (b) copies of the acknowledgment page from the PREA training is retained in each volunteer and contractor file. The Auditor reviewed the sign in sheets from the PREA training sessions for the past twelve months. Each sign in sheet reflected acknowledgment signatures from contractors and volunteers for the PREA training they received.

The Inmate Programs and Services Director keeps this information on file along with the background investigations into said volunteers.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding volunteer and contractor training. No recommendations or corrective action.

**115.33 Inmate education**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Intake Staff
- Random Inmates

Provision (a):

The PAQ indicates inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. This is detailed in J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 6-7, Procedure #4, B, 1-6.

The PAQ further states 10,553 inmates were admitted to the facility during past twelve months and were given PREA information at intake:

The Offender Handbook, as well as the PREA Posters were observed during the on-site tour of the facility by the Auditor. The Auditor reviewed written materials in both English and Spanish.

Provision (b)

The PAQ reveals 2,197 of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) 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.

During interviews with intake staff, it was confirmed the Offender Handbook is located on the kiosk and the acknowledgment for the handbook is electronic on the kiosk. When this is explained to the inmate during orientation, the acknowledgment for orientation is signed by the inmate and kept in their inmate file.

Provision (c)

The PAQ states agency policy requires that inmates who are transferred from one

facility to another be educated regarding 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, to the extent that the policies and procedures of the new facility differ from those of the previous facility. This is outlined in J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 6, Procedure #4, B, 1-3.

As indicated in Provision (b) the intake staff provide the PREA information immediately upon arrival into the facility. Interviews with intake staff revealed that upon arrival at the facility inmates are provided access to orientation materials, including PREA related materials, before being assigned to a housing unit. This is a requirement for all inmates, whether they are a new intake or a transfer from another facility.

During interviews with inmates, each were asked to briefly outline what they learned during PREA education. All responses were similar in nature, stating such things as: zero tolerance for sexual abuse or harassment, right to be free from sexual harassment and retaliation for reporting, who to talk to about a concern, who to report an incident to, and call the number on the posters around the facility.

#### Provision (d)

According to the PAQ, the various training elements provided to the inmate population range from PREA documents in both English and Spanish, PREA posters in both English and Spanish, to staff members who are fluent in Spanish. They also have a list of interpreters available. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 6, Procedure #4, B, 4.

As a back-up, anytime a translation service is needed and in the unlikely event an interpreter is not available, the staff can use Google Translate. Google translate can be accessed via a computer with an attached microphone to address any translation needs for the inmates of the facility. At the present time, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week.

During the interview with the PCM, it was revealed that if an inmate had a disability not covered under the training elements established by the facility, the Local Disability Assistance Office would be notified to ensure each inmate is able to understand and retain the PREA materials to a comfort level of comprehension.

#### Provision (e)

The PAQ indicates the agency maintains documentation of inmate participation in PREA education sessions. This is addressed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 6, Procedure #4, B, 5.

#### Provision (f)



It is evident the facility makes every effort to ensure the inmates receive crucial education about sexual abuse and sexual harassment. Using varying formats, the inmate population receives vital information in user friendly, comprehensible ways. The Inmate Orientation Handbook is an excellent tool which specifically lays out the prevention of sexual violence, zero tolerance policy and includes multiple methods inmates can seek assistance regarding sexual violence.

The facility has a variety of PREA posters, in both English and Spanish. These posters are different throughout the facility as not to become easy to overlook. The facility also has PREA murals painted on walls of every building and housing unit. During the on-site, the Auditor observed these posters and paintings in every room throughout the facility.

In interviews with inmates, they each reported the PCM, as well as other staff, check with them formally and informally about PREA issues and practices. They often ask them questions to make sure they are remembering PREA policies and reporting guidelines, as well as feeling safe on the compound.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility exceeds the standards for inmate education. No recommendations or correction action.

**115.34 Specialized training: Investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews with the following:

- Investigative Staff

Provision (a)

According to the PAQ, agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. The training is the NIC Training Online: PREA - Investigating Sexual Abuse in a Confinement Setting. NIC, PREA Training Test Results, confirmed the investigator completed the required training and passed the curriculum post-test.

Currently there is one investigator employed by the agency and/or facility who is responsible for conducting administrative/criminal investigations into allegations of sexual abuse or sexual harassment. Through staff interview and review of training documents by the Auditor, the assigned investigator has attended the required training and meet all training requirements.

The Auditor reviewed sign-in sheets and training materials reflecting the general PREA training that is mandated for all employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheet confirms, in addition to specialized training, the investigator received the general PREA training mandated for all employees.

Through a review of training records and an interview with the facility investigator, the Auditor was able to confirm that all training requirements have been met.

Provision (b)

As indicated in Provision (a), through staff interview and a review of training documents by the Auditor, the assigned investigator has attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.

Provision (c)

Per the PAQ, the agency maintains documentation showing that investigators have completed the required training. The Auditor reviewed this documentation while on-site. The investigator assigned to the facility who conducts administrative/criminal investigations has completed all required training. The Auditor confirmed this through verifying training attendance and reviewing certifications.

Provision (d)

The Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding specialized training: investigations. No recommendations or corrective action.

115.35

**Specialized training: Medical and mental health care**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 400: Health Care Policy 400.0, Inmate Health Care Services, effective October 13, 2022

Interviews:

- Medical and Mental Health

Provision (a):

The PAQ indicates the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The policy that covers this is JRLDC Policies and Procedures, Chapter 400: Health Care Policy 400.0, Inmate Health Care Services, effective October 13, 2022.

The PAQ indicates thirty (100%) medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. This requirement is outlined in JRLDC Policies and Procedures, Chapter 400: Health Care Policy 400.0, Inmate Health Care Services, effective October 13, 2022, pp. 3-4, Procedure #5, A-C.

Through staff interview and a review of training documents by the Auditor, each of the medical and mental health care practitioner have attended the required training and meet all training requirements.

Through a review of training records and an interview with the Detention Center Director, medical and mental health care practitioners, the Auditor was able to confirm that all training requirements have been met.

Currently there are thirty medical and mental health staff assigned to the facility. Through staff interview and review of training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements.

Provision (b):

All facility medical staff are prohibited by procedure from performing forensic examination on sexual abuse victims. Through the interview process it was confirmed

forensic exams are conducted off-site, but SANE/SAFE personnel. They are not conducted on-site, nor are they conducted by facility medical staff.

Provision (c):

According to the PAQ, the agency maintains documentation showing that medical and mental health practitioners have completed the required training. As indicated in Provision (a), through staff interview and a review of the training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.

Provision (d):

The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for facility employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, the contracted and direct hire medical staff received the general PREA training mandated for all employees.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding specialized training: medical and mental health care. No recommendations or corrective action.

**115.41 Screening for risk of victimization and abusiveness**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015

Observations during on-site review

Interviews:

- Staff Responsible for Risk Screening
- PREA Coordinator (PC)
- Inmates

Provision (a)

The PAQ indicates the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates. This policy is detailed in JRLDC Policies and Procedures, Chapter Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015

Of the random and targeted inmates interviewed relative to this all were able to recall being asked questions relative to their concern for sexual safety, and if they felt like they were going to harm themselves.

During the on-site audit, the Auditor was able to ask questions about the intake process.

Provision (b)

As stated in (a), according to the listed policies all inmates must be screened within 72 hours of arrival.

The Auditor reviewed the PAQ which indicated in the past twelve months, 100% of 4,010 inmates were screened for the risk of sexual victimization or sexual abusiveness within 72 hours of their entry into the facility.

A list of inmates' arrival dates and dates of evaluation demonstrate compliance with this standard. From the roster of inmates, the Auditor chose files of inmates to review.

The files were for inmates from varying housing units, ethnic and racial backgrounds. The names were chosen from a complete alpha roster of inmates. The Auditor went down the list and randomly chose names, in no order or sequence, from the roster.

The Auditor reviewed inmate files to ensure they received the training and how that training was completed. All files had verification that the initial screening had occurred within 72-hours of arrival.

Of the random and targeted inmates interviewed, all recalled being asked questions specific to previous sexual abuse & harassment within three days of their arrival at the facility. Each inmate indicated that it occurred the day of their arrival.

During the interview process, classification staff reported all of the PREA related questions are asked during initial intake and ongoing classification screenings.

The specific policy governing this provision is JRLDC Policies and Procedures, Chapter Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015, p. 2, procedure #2, A.

#### Provision (c)

The PAQ indicates the risk assessment is conducted using an objective screening instrument.

Inmates who surpass the threshold on the screening form are referred to Mental Health for an additional assessment regarding their level of risk, environmental considerations, and treatment needs. The inmate is reassessed within thirty days, after the initial meeting.

The Auditor was able to verify compliance with this provision through the review inmate records, reflecting copies of the required assessments. A review of the screening instrument proved it is weighted and scored based upon responses to specific questions required in the Standard and Provision.

#### Provision (d)

The PAQ indicates the screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization.

- Whether the inmate has a mental, physical, or developmental disability;
- The age of the inmate
- The physical build of the inmate
- Whether the inmate has previously been incarcerated
- Whether the inmate's criminal history is exclusively nonviolent
- Whether the inmate has prior convictions for sex offenses against an adult or a child
- Whether the inmate is perceived to be LGBTI
- Whether the inmate has previously experienced sexual victimization
- The inmate's own perception of vulnerability

- Whether the inmate is detained solely for civil immigration purposes.

Provision (e)

The PAQ states the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency in assessing inmates for risk of being sexual abusive.

Provision (f)

The PAQ states policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.

The PAQ states 1,477 inmates entered 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.

JRLDC Policies and Procedures, Chapter Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015, p. 3, Procedure #3, A-B, detail this provision.

Out of the inmate records which were reviewed by the auditor, all had been reassessed within thirty days. Different staff completed these finished screening documents, with each instrument being finalized consistent with the standard.

Provision (g)

The PAQ indicates policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

JRLDC Policies and Procedures, Chapter 200.0 Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015, p. 3, Procedure #3, A-B, detail this provision.

Classification staff indicated they monitor the inmate population, and will re-assess when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that may have bearing on the inmate's risk of victimization or abusiveness.

Provision (h)

The PAQ indicates policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or



gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability. This is outlined in JRLDC Policies and Procedures, Chapter Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015, p. 3, Procedure #2, Procedure #2, A.

Classification staff as well as the PC, indicated they do not discipline any inmate for their refusal to answer these questions during an assessment, rather each of them indicated they would explain the reason behind the question and attempt to solicit a response. However, no disciplinary action would be taken if the inmate chose not to respond.

#### Provision (i)

The PAQ indicates the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

As stated in (a), the Auditor interviewed classification staff. During the interview process, the classification staff indicated access to the inmate's classification information is secured, with controlled access by classification staff.

The Auditor interviewed the PC regarding who can specifically access the screening information collected during intake and screenings, and was informed that Medical Staff, Mental Health Staff, Classification Staff and the PC have access. All information is limited to a need-to-know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments.

#### Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding Screening for Risk of Sexual. Victimization and Abusiveness. No recommendations or corrective action.

**115.42 Use of screening information**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015

Interviews:

- Staff Responsible for Risk Screening
- PREA Coordinator (PC)
- Inmates

Provision (a)

The PC indicated every assessment completed by staff is factored into the placement and programming of each inmate. She further stated the inmate's risk levels, housing and program assignments are guided with the use of these various assessments ensuring that every inmate, especially those at high risk of being sexually victimized, are separated from those at high risk of being sexually abusive.

Following a review of inmate records, the Auditor was able to verify that the information from these assessments was being utilized in the various classification decisions made by staff.

Provision (b)

During interviews with staff who are responsible for risk screening, the Auditor was informed that because of the assessment procedures being utilized, each inmate is individually evaluated. Staff not only use the assessment procedures which are in place, additional consideration is given to the discussions with each individual inmate when making classification and housing decisions. This is addressed in JRLDC Policies and Procedures, Chapter 200.0 Intake and Booking, Policy 206.0, PREA Intake Screening/Risk of Victimization, revised May 30, 2015, pp. 2-3, Procedure #2, A-D.

Provision (c)

During interviews with staff who are responsible for risk screening, they indicated the Transgender or Intersex inmates view of their own safety is taken into serious consideration when determining housing placements and programming assignments. In addition, the staff who are responsible for risk screening indicated because of the

assessments that are utilized, each inmate is evaluated individually.

The interview notes of the PC indicated according to policy, the gender identification of each inmate is initially determined by their legal sex assignment, generally at birth; however, from that point forward every inmate is individually assessed and classified to ensure the safety of each inmate, as well as the safety of the inmate population.

There were no transgender or intersex inmates in the facility at the time of the on-site audit. Therefore, no interviews were conducted.

#### Provision (d)

During interviews with the PC and staff responsible for screening, all indicated the Transgender or Intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. They further confirmed that regular classification reassessments are conducted a minimum of every six months, or if the inmate is involved in an incident of a sexual nature.

Policy dictates placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

There were no transgender or intersex inmates in the facility at the time of the on-site audit. Therefore, no interviews were conducted.

#### Provision (e)

As stated in (a), the Auditor was able to review the intake process and interview classification staff who were able to explain the classification process.

Policy dictates that a transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

During interviews with the PC and staff responsible for screening, all specified the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. These inmates are interviewed further to determine enemies and potential or perceived threats. Housing placement and programming assignments are based on this information.

There were no transgender or intersex inmates in the facility at the time of the on-site audit. Therefore, no interviews were conducted.

#### Provision (f)

According to the PC and the staff responsible for risk screening, each indicated the Transgender or Intersex inmate's views of their own safety is given serious consideration when providing showering options. In addition, they clarified, transgender or intersex inmates would be able to shower separately from other inmates by utilizing alternate shower times.

As previously identified, each of the housing units have bathrooms with shower stalls that have screens for use by transgender or intersex inmates for additional privacy, if desired. The random staff who were interviewed also indicated that if a transgender or intersex inmate asked to shower separately, they would arrange a separate shower time from the other inmates.

There were no transgender or intersex inmates in the facility at the time of the on-site audit. Therefore, no interviews were conducted.

Provision (g):

The interview with the PC revealed that neither the Horry County Sheriff's Office or the facility are under any consent decree, legal settlement, or legal judgment requiring the establishment of a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex (LGBTI) inmates. All indicated that all LGBTI inmates are housed within the general population unless specific issues are present and only then the appropriate staff will meet with the inmate and address the concerns.

During an interview with gay and bisexual inmates, it was reported they were housed in general population. Further they reported they had never been housed anywhere other than general population. The Auditor reviewed an inmate roster and confirmed that all gay and bisexual inmates were housed in general population.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses policies regarding the use of screening information. No recommendations or corrective action.

<b>115.43</b>	<b>Protective Custody</b>
	<p data-bbox="256 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 632 374">Documentation Reviewed:</p> <ul data-bbox="331 443 1469 600" style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p data-bbox="256 642 751 676">Observations during on-site review</p> <p data-bbox="256 719 416 752">Interviews:</p> <p data-bbox="256 795 576 828">PREA Coordinator (PC)</p> <p data-bbox="256 871 432 904">Provision (a)</p> <p data-bbox="256 947 1477 1216">The PAQ indicates the agency has a policy prohibiting the placement of 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. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 8, Procedure #7, A-B.</p> <p data-bbox="256 1258 1469 1415">The PAQ reflects during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The Auditor interviewed the PC specific to this issue and confirmed there have not been any inmates placed in protective custody in the past twelve months.</p> <p data-bbox="256 1458 432 1491">Provision (b)</p> <p data-bbox="256 1534 1469 1724">The PAQ reflects during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The Auditor interviewed the PC specific to this issue and confirmed there have not been any inmates placed in protective custody in the past twelve months. Consequently, no inmates could be interviewed relative to this provision.</p> <p data-bbox="256 1767 432 1800">Provision (c)</p> <p data-bbox="256 1843 1469 2045">The PAQ reflects during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard, specific to a period longer than thirty-days, while awaiting alternative placement. The Auditor interviewed the PC specific to this issue and confirmed there have not been any inmates placed in protective custody in the past twelve months.</p>

Provision (d)

The PAQ reflects during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard, specific to a period longer than thirty-days, while awaiting alternative placement.

The Auditor interviewed the PC specific to this issue and confirmed there have not been any inmates placed in protective custody in the past twelve months.

Provision (e)

During the past twelve months there have been zero inmates placed into protective custody in accordance with this standard. This was confirmed via the PC interview.

During the facility tour the Auditor did not observe any inmates in segregation due to PREA allegations.

The PAQ indicates if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every thirty-days to determine whether there is a continuing need for separation from the general population. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 8, Procedure #7, B, 4.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the facility meets every provision of the standard relative to protective custody. No recommendation or corrective action.

**115.51 Inmate reporting**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Inmate Orientation Sheet
- JRLDC Inmate Orientation Signature Sheet, dated August 26, 2016
- JRLDC 2022 Inmate Handbook
- JRLDC PREA Orientation Brochure

Interviews:

- PREA Coordinator (PC)
- Random Staff
- Random Inmates

Provision (a):

The PAQ indicates the agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 9-10, Procedure 9, a, 1-4.

The PREA Orientation Brochure indicates allegations can be reported in several ways:

- Telephone: (843) 248-1520;
- Report to any staff, volunteer, contractor, or medical or mental health staff;
- Submit a grievance or sick call slip;
- Report to the PREA Coordinator;
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on your behalf by calling (843) 248-1520;
- You also can submit a report on someone's behalf, or someone at the facility can report for you.

Provision (b):

See Provision (a) for multiple ways to report.

During the on-site tour, each phone that was tested was in working order and could be used to call out. Additionally, during the on-site portion of the audit, the Auditor observed numerous different PREA posters in both English and Spanish throughout the facility. These posters were observed in each housing unit, common areas, main hallways, intake holding area, dining room, etc.

The facility does not detain inmates solely for civil immigration purposes.

Provision (c):

The PAQ indicates the facility has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. This policy is covered in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 9-10, Procedure 9 and the JRLDC Inmate Handbook pp 22-24.

The inmates interviewed regarding this provision, 100% indicated they were aware of the ability to make reports of sexual abuse or sexual harassment in person and in writing.

Provision (d):

The PAQ indicates the facility has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. These procedures are documented in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 9-10, Procedure 9. The PAQ states the facility staff may report anonymously to the PREA Coordinator, to the PREA Compliance Manager and the Horry County Sheriff's Office.

Through interviews with the staff, several methods for staff to privately report sexual abuse of inmates were identified. All staff indicated they may choose to make a private report to their supervisor, another supervisor, the PREA Coordinator or the Horry County Sheriff's Office.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses policies regarding inmate reporting. No recommendations or corrective action.



115.52

**Exhaustion of administrative remedies**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015

Observations during on-site review

Interviews:

- Random and Specialized Staff
- Random and Targeted Inmates

Provision (a):

In the PAQ the facility reported the agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse and sexual harassment.

JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 6, Attachment A outlines the inmate grievance considerations for compliance with PREA Standards.

Through formal interviews with inmates, it was reported they could file a grievance to report an allegation of sexual abuse. The Auditor asked each inmate interviewed if he could file a grievance alleging an imminent risk of sexual abuse. The inmates were aware of the grievance process and no offender interviewed had done so. Most inmates stated they would immediately notify a staff member as that is the quickest way to report. Some inmates stated they might use the hotline number. Each inmate was asked if he was required to give his name when alleging sexual abuse. All inmates were aware they could submit an allegation anonymously.

Provision (b):

The PAQ indicates for PREA related matters, the time limits for submission of a grievance will be waived. Further an inmate will not be required to attempt to informally resolve an allegation of sexual abuse or harassment. All grievances involving allegations of sexual abuse and/or harassment will be immediately submitted to the Detention Center Director and the PREA Coordinator. This is outlined in JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and

Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 2, Procedure #1, C and p. 3, Procedure #5, B.

Provision (c):

The PAQ indicates policy and 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. Further, an inmate grievance alleging sexual abuse is not referred to the staff member who is the subject of the complaint. This is outlined in JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 3, Procedure #5, E and p. 6, Attachment A.

Provision (d):

The PAQ indicates The agency's policy and procedure 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. This is outlined in JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 6, Attachment A.

The PAQ also reflects, the facility had four grievances in the past twelve months.

During the on-site review of documentation, the Auditor reviewed investigation records in which four allegations were reported through the grievance mechanism and confirmed all time frames had been met.

Provision (e):

The PAQ reflects that policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. Policy and procedure also requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline. This is outlined in JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 6, Attachment A. In the past twelve months zero inmates declined third-party assistance.

Provision (f):

The PAQ indicates a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. This policy requires an initial response within 48 hours with a final decision within five days. This is outlined in JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 7, Attachment A. The facility reported zero emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months.

Through the interview process with staff, the Auditor confirmed staff were aware that inmates could submit grievances alleging a risk of imminent sexual abuse or to report an allegation of sexual abuse. Facility staff understood the procedures for submitting these emergency grievances alleging a risk of imminent sexual abuse. Supervisors were aware of the time limits in response to an emergency grievance alleging an imminent risk of sexual abuse.

Provision (g):

The PAQ indicates there is a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith. This is outlined in JRLDC Policies and Procedures, Chapter 500.0 Inmate Programs Activities and Discipline, Inmate Grievances, Policy 502.0, revised November 15, 2015, p. 7, Attachment A.

The facility reports in the past twelve months two inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses policies regarding exhaustion of administrative remedies. No recommendations or corrective action.

**115.53**

**Inmate access to outside confidential support services**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Observations during on-site review

Interviews:

- Random and Targeted Inmates
- PREA Coordinator (PC)

Provision (a):

The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse.

The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. During the facility tour the Auditor observed PREA mailing addresses and telephone numbers posted throughout the facility

The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.

The facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 15-16, Procedure #11, C, outlines the guidelines for Provision (a).

Provision (b):

The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored.

The facility informs inmates, prior to giving them access to outside support services,

of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law. This was confirmed by the PC.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 15-16, Procedure #11, C, outlines the guidelines for Provision (b).

Provision (c):

Horry County Rape Crisis Center (HCRC) is the outside agency utilized by the facility. The facility does not have a MOU with HCRC as it is not needed. HCRC is a public service for the county. The facility has historically used HCRC when allegations of sexual abuse have been made. This information was confirmed by HCRC staff.

Inmates that were interviewed were familiar with HCRC.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses inmate access to outside confidential support services. No recommendations or corrective action.

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p>Observations during on-site review</p> <p>Provision (a)</p> <p>The facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. This is outlined in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 11, Procedure #9, C.</p> <p>During the facility tour the Auditor observed posting throughout the facility explaining how to report PREA allegations, including third party reporting.</p> <p>The agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. This information is available on the facility website. <a href="https://www.horrycountysc.gov/departments/sheriffs-office/detention-center">https://www.horrycountysc.gov/departments/sheriffs-office/detention-center</a></p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined the facility meets every provision of the standard which addresses policies regarding third party reporting. No recommendations or corrective action.</p>

**115.61 Staff and agency reporting duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- PREA Coordinator (PC)
- Detention Center Director

Provision (a):

The PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 9-13, Procedure #9, A-C.

The PAQ indicates the agency requires all staff to report immediately and according to agency policy any retaliation against inmates or staff who reported such an incident. Additionally the agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12, F, 1-2.

Both of these points were confirmed through the interview process with Detention Center Director.

Provision (b):

The PAQ reflects that apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 12-13, G, 1-2. The Detention Center Director also confirmed this policy is being enforced.

Provision (c):

The PAQ indicates unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners are required to report sexual abuse pursuant to provision (a). Additionally, medical and mental health practitioners are required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. This is outlined in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 12-13, G, 1-2. This was confirmed through the interview process with the Detention Center Director.

Provision (d):

The PAQ reports if the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency reports the allegation to the designated State or local services agency under applicable mandatory reporting law. This is detailed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 12-13, G, 1-2. This was confirmed through the interview process with the PC.

Provision (e):

The PAQ states the facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. This is discussed in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 12-13, G, 1-2. This was confirmed through the interview process with the PC.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding staff and agency reporting duties. No recommendations or corrective action.



**115.62 Agency protection duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Agency Head
- PREA Coordinator (PC)
- Detention Center Director
- Random Staff

Provision (a):

The PAQ states when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. This is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 13, Procedure #10, F, 1.

The PAQ reveals there have been zero instances when the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse. This was confirmed through the interview process with the PC.

Interview notes reflect the AH indicated if he received such information, he would contact the facility where the inmate was housed and if necessary, the inmate could be temporarily transferred while the investigation was completed. If the perpetrator were identified, the perpetrator would be placed in disciplinary segregation pending completion of the investigation.

The Auditor interviewed the Detention Center Director, who stated he would take immediate action to protect the victim (inmate). The victim might be moved to another area of the facility or to another facility all together, depending on what was needed to protect the victim. He stated the perpetrator, if known, would be placed in segregated housing.

During random staff interviews, all staff reported if they received an allegation from an inmate, they would immediately separate the victim and the perpetrator, safeguard the victim, contact their supervisor, and preserve evidence.

Conclusion:

<p>Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses policies regarding agency protection duties. No recommendations or corrective action.</p>
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**115.63 Reporting to other confinement facilities**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Detention Center Director
- PREA Coordinator (PC)

Provision (a):

The PAQ states the agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. This is found in J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 10-11. B. 5.

In the past twelve months, the facility received zero allegations that an inmate was abused while confined at another facility. Due to non-occurrence there was not any documentation to review.

Provision (b):

According to the PAQ, the inmate is referred to the health care provided, assessed and evaluated. The report of the incident is documented, and that document is forwarded to the Director of Detention. The Director forwards this report to the agency head of the facility that the alleged incident occurred. The documentation to include the correspondence is maintained by the PREA Coordinator. Notifications are made as soon as possible, but must be made no later than 72 hours after receiving the allegation. This is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 10-11. B. 5.

Through the interview process, it was confirmed zero inmates reported being sexual abused at another facility.

Provision (c):

The PAQ reflects that the facility documents that it has provided such notification within 72 hours of receiving the allegation. This is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 10-11. B. 5.

On the PAQ, the facility reported they have not had to notify another facility in the past 12 months. Due to non-occurrence there was not any documentation to review.

Provision (d):

See Provision (a) for specific details and policies.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses reporting to other confinement facilities. No recommendations or corrective action.

**115.64 Staff first responder duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Detention Center Director
- PREA Coordinator (PC)
- First Responders

Provision (a):

The Detention Center Director indicated First Responder staff have been trained in the PREA process, and frequent training is conducted to ensure competency and compliance.

In the training curriculum, it defines a First Responder as:

- The first person to know information or coming upon an incident.
- Upon learning of a PREA allegation that an inmate was sexually abused, the first security staff member to respond to the report is required to take several immediate steps

During staff interviews, all staff, were able to articulate to the Auditor how to respond to a PREA incident. All staff, volunteers and contractors were aware of the mandate to separate the perpetrator from the victim, preserve physical evidence, as well as the area the incident occurred, seek medical aid, as needed, and report the incident.

During interviews with First Responders, all stated they were trained in the PREA process through annual in-service training, on-the-job training, and staff meetings. Each verbalized the PC frequently reminds them of PREA policies and speaks with them regarding the importance of PREA and safety from sexual abuse or harassment.

Non-custody staff who were interviewed, all stated they would notify custody staff, separate the victim and the perpetrator, direct the victim and the perpetrator not to do anything to destroy evidence and keep the scene secure until custody staff arrived. They all verbalized the importance of, as well as their understanding of the need for confidentiality in all cases.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp 13-15, Procedure #10 address the requirements of First Responder training.

Provision (b):

In the PREA training curriculum it outlines the responsibilities of a First Responder as:

- Separate the alleged victim and abuser
- Preserve and protect any crime scene until appropriate steps can be taken to collect evidence
- If abuse is within the time period that allows for physical evidence (72 hours), request the alleged victim and abuser do not take any actions that could destroy physical evidence to include: brushing teeth, washing, urinating, defecating, smoking, drinking, or eating.
- If the first responder is NOT a security staff member, the responder is required to request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff.
- First Responder secondary responsibilities are:
  - Record the date and time the incident reportedly occurred
  - Record the date and time the report was made
  - Record who initially reported the allegation
  - Secure the victims clothing and bedding
  - Treat the area in question as a crime scene
  - Remain observant of any person, events, potential evidence and environmental conditions
  - Relay information to the investigative team.

The Auditor's review of the PREA training curriculum that all staff, volunteers, and contractors received, identifies whoever received the information first, as a First Responder. As a First Responder these individuals are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the alleged perpetrator, remove all uninvolved parties, relay any observations to shift supervisors or the PC.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the facility meets every provision of the standard which addresses staff first responder duties. No recommendations or corrective action.

<b>115.65</b>	<b>Coordinated response</b>
	<p data-bbox="256 188 1015 221"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <hr/> <p data-bbox="256 264 557 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 632 374">Documentation Reviewed:</p> <ul data-bbox="331 443 1473 600" style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p data-bbox="256 642 416 676">Interviews:</p> <ul data-bbox="331 745 732 779" style="list-style-type: none"> <li>• Detention Center Director</li> </ul> <p data-bbox="256 822 443 855">Provision (a):</p> <p data-bbox="256 891 1445 1133">According to the PAQ and JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 13-15 Procedure #10, the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="256 1171 1457 1249">According to policy, the shift supervisor shall activate the coordinated response plan and ensure the following steps have been taken.</p> <ul data-bbox="331 1317 1457 1727" style="list-style-type: none"> <li>• The separation of the alleged victim and perpetrator.</li> <li>• The security and protection of any crime scene to keep potential evidence in place for examination and investigation.</li> <li>• Notifications made to the Detention Center Director, investigator, and other designated agency and facility leadership and all required incident reporting procedures.</li> <li>• The only persons permitted to enter a secured crime scene shall be the assigned investigator or medical staff as needed.</li> <li>• The area shall remain secured as a crime scene until verification of a completed investigation and released by the investigating authority.</li> </ul> <p data-bbox="256 1765 1437 1928">The facility coordinates actions taken in response to an incident of sexual abuse among first responders, medical and mental health professions, investigators, and Executive Staff. Following the initial response continued coordination between departments is achieved through PREA after action meetings.</p> <p data-bbox="256 1966 1457 2085">The Detention Center Director confirmed the steps listed above for First Responders. He indicated each item breaks down what the various responsibilities are for the respective staff members and positions.</p>

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility exceeds the standard regarding coordinated response. The coordinated response is well thought out and expertly implemented. No recommendations or corrective action.



<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Human Resources (HR)</li> </ul> <p>Provision (a):</p> <p>According to the PAQ, the agency, facility, or any other government entity is not responsible for collective bargaining on the agency's behalf and has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012 or since the last PREA audit, whichever is later.</p> <p>The facility is not under a collective bargaining agreement and has the authority to discipline staff members as within the employee discipline policy.</p> <p>According to HR, management does have the right to separate the inmate from a staff member who is the subject of an investigation. This separation can either be temporarily reassigning the employee or redirecting the employee.</p> <p>Provision (b):</p> <p>Auditor is not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard preservation of ability to protect inmates from contact with abusers. No recommendations or corrective action.</p>

**115.67 Agency protection against retaliation**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Detention Center Director
- Staff in Charge of Monitoring Retaliation

Provision (a):

According to the PAQ, the agency has 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. Additionally the agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. This policy is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12, F, 1-2.

Provision (b):

According to the PAQ the agency employs 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

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12, F, 1, states in part the PREA Coordinator will be responsible for monitoring retaliation. For at least 90 days following the submission of the report, or longer upon the discretion of the Coordinator, the PREA Coordinator will monitor the conduct and treatment of inmates, employees, contractors and volunteers who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to determine if there are changes that may suggest possible retaliation by inmates, employees, or others. The PREA Coordinator will, at a minimum, ensure the following activities/reports are reviewed during the 90-day period that may suggest retaliation. All reviews will be documented and maintained by the PREA Coordinator for record keeping purposes.

- Inmate disciplinary reports;
- Inmate housing or program changes; and/or
- Negative employee, contractor or volunteer performance reviews or reassignments, reports, or disciplinary action.

Provision (c):

See Provision (a) and (b) for specific policy details.

In the interview with the Detention Center Director, the Auditor was informed there are multiple measures used to protect inmates and staff from retaliation. These measures include considering and monitoring if the inmate is being given changes in housing assignments, work assignments or an increase in disciplinary reports. The monitoring of staff includes watching for negative performance reviews or work reassignments. The staff in charge of monitoring retaliation echoed these comments.

The facility reports zero incidents of retaliation in the past twelve months.

Provision (d):

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12, F, 1-2, says in part, for at least 90 days following the submission of the report, or longer upon the discretion of the Coordinator, the PREA Coordinator will monitor the conduct and treatment of inmates, employees, contractors and volunteers who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to determine if there are changes that may suggest possible retaliation by inmates, employees, or others. The PREA Coordinator will, at a minimum, ensure the following activities/reports are reviewed during the 90-day period that may suggest retaliation. All reviews will be documented and maintained by the PREA Coordinator for record keeping purposes.

Provision (e):

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12, F, 1-2, states detention center employees will take the steps necessary to ensure the safety of any individual who cooperates with an investigation involving an incident of sexual abuse and/or harassment and who expresses a fear of retaliation. The PREA Coordinator will be contacted in these cases and will be responsible for documenting any agreed upon steps or actions to be taken and for periodically monitoring the implementation of such actions to ensure they are being conducted. The PREA Coordinator will not be required to review or maintain such documentation in cases where the allegation or report of sexual abuse or harassment is determined to be unfounded. The termination of monitoring in these cases will be documented and maintained by the PREA Coordinator.

Provision (f):

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12, F, 1-2, says in part, the PREA Coordinator will not be required to review or maintain such documentation in cases where the allegation or report of sexual abuse or harassment has been determined to be unfounded. The termination of monitoring in these cases is, however, to be documented and maintained by the PREA Coordinator.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard agency protection against retaliation. No recommendations or corrective action.

**115.68 Post-allegation protective custody**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Chapter 300.0 Classification, Policy 301.0, Administrative Separation, revised May 30, 2015

Interviews:

- Detention Center Director
- Classification Staff

Provision (a):

The PAQ indicates the facility did not use segregated housing in the past twelve months for PREA related allegations.

Classification staff reported there are multiple housing options available and therefore a sexual abuse victim is not automatically placed in segregation for an inmate's protection.

Other alternatives are always explored, and segregation is utilized as a last resort. The Auditor was informed there are numerous areas in the facility to place sexual abuse victims to ensure they are protected from abusers without having to place the victim in segregation housing.

Classification staff confirmed inmates are allowed to participate in programs, education, and work while being housed in segregation for protection as a sexual abuse victim, consistent with safety and security needs.

JRLDC Chapter 300.0 Classification, Policy 301.0, Administrative Separation, revised May 30, 2015, p. 3, Procedure #2, B, d, states that the placement of an inmate in involuntary separation status solely due to his/her perceived risk of sexual victimization, sexual orientation, gender identity status, intersex status, age, or transgender status, is prohibited unless an assessment of all other available housing resources has been exhausted and there are no other viable alternatives for separating the inmate from likely abusers. If an immediate assessment cannot be completed, designated staff may involuntarily place an inmate in administrative separation status for no more than 24 hours while the assessment is completed.

Conclusion:

<p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard post allegation protective custody. No recommendations or corrective action.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<p data-bbox="256 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 632 374">Documentation Reviewed:</p> <ul data-bbox="331 443 1469 600" style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p data-bbox="256 642 416 676">Interviews:</p> <ul data-bbox="331 745 732 860" style="list-style-type: none"> <li>• Detention Center Director</li> <li>• PREA Coordinator (PC)</li> <li>• Investigative Staff</li> </ul> <p data-bbox="256 902 435 936">Provision (a)</p> <p data-bbox="256 978 1477 1135">The PAQ reflects the facility has a policy related to criminal and administrative investigations. That policy for this standard is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 13-15. Procedure #10, A-F.</p> <p data-bbox="256 1178 1477 1335">During the interview with the investigator, it was indicated investigations begin immediately following notification of the incident. The same protocols are used regardless of how the incident is reported, whether it is in person, telephonically, third party, by mail or anonymously.</p> <p data-bbox="256 1377 435 1411">Provision (b)</p> <p data-bbox="256 1453 1445 1610">The PAQ reports that all investigators receive specialized training in sexual abuse investigations. Investigative staff confirmed attendance at these training sessions. The Auditor reviewed the investigators training records and verified attendance and participation in all mandated training.</p> <p data-bbox="256 1653 435 1686">Provision (c)</p> <p data-bbox="256 1729 1477 2040">Investigative staff indicated all investigations follow practically the same investigative format. Interviews are conducted with the victim first, then any witnesses, leaving the perpetrator for last. It can vary slightly if it is an alleged Sexual Harassment rather than an alleged Sexual Assault or Sexual Abuse. If it is an alleged Sexual Assault or Sexual Abuse incident, the SAFE/SANE personnel are generally involved. Except in the cases where the SAFE/SANE team collect the evidence, the investigator collects and secures all evidence. All investigative staff are trained in evidence collection. The Auditor reviewed training records, which confirmed this training.</p>

Provision (d)

During the interview process, the investigator reported when the quality of evidence appears to support a criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. In all cases if it appears to be criminal, Miranda warnings are given to the person(s)

Provision (e)

The investigative staff reported credibility of anyone involved in the investigation is determined through the investigative process. Everyone is treated as credible and truthful unless the investigation proves otherwise. Polygraph testing is not used in the investigative process of PREA cases.

Provision (f)

During the interview process, the investigative staff reported in administrative investigations he follows the evidence as the investigation unfolds. In following the evidence, he attempts to determine if staff actions or failure to act contributed to the allegation. He summarizes all findings in his report.

Investigative staff reported administrative investigations always include an effort to determine whether staff actions or failure to act contributed to the abuse. Additionally every part of the investigation is documented in written reports that include descriptions of physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

Provision (g)

When asked about handling criminal investigation, the investigative staff reported every step is thoroughly documented, including investigative steps, interviews, facts, and findings, up until the point it is determined to be criminal in nature. When the incident rises to the level of criminal prosecution, it is turned over prosecutorial authorities to determine if charges will be filed

According to the PAQ, in the past twelve months there has been zero substantiated allegations of conduct that appear to be criminal that were referred for prosecution.

Provision (h)

Per the PAQ, in the past twelve months there has been zero criminal cases referred for prosecution.

During the interview, the investigator indicated if the investigation uncovers evidence that a crime has been committed, the case, along with every piece of evidence will be turned over prosecutorial authorities who will determine if charges will be filed. The institution keeps a file with documentation that corresponds with actions within the facility, i.e.: Responder Check-off (Supervisory, Medical, Mental Health), 30-day reviews, sign-off form for offenders housing choice, etc.



Provision (i)

According to the PAQ, the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. This is outlined in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 14. #5.

Provision (j)

During the interview, the investigator confirmed that if a principle (victim or abuser) is released or terminated from the agency, it in no way alters the investigation. The investigation continues to its natural end regardless of the employment or residence of the individuals involved. This was confirmed by the Detention Center Director and the PC.

Provision (k)

The PAQ indicates that any State entity or Department of Justice component that investigates shall provide a basis for terminating an investigation.

Provision (l)

This provision does not apply.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the facility meets every provision of the standard regarding criminal and administrative agency investigations. No recommendation or corrective action.

115.72	<p><b>Evidentiary standard for administrative investigations</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p>Interview with the following:</p> <ul style="list-style-type: none"> <li>• Investigative Staff</li> </ul> <p>Provision (a)</p> <p>JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 13, Procedure #10, E, indicates the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The Auditor interviewed investigative staff who relayed that during an investigation, all available evidence is collected (from the victim, from the perpetrator, from the scene; interviews; etc.). Further the facility imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets the standard regarding evidentiary standard for administrative investigations. No recommendations or corrective action.</p>
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**115.73 Reporting to inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interview with the following:

- Investigative Staff

Provision (a)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 16-17, Procedure #12, A, indicates that any inmate who alleges that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.

The PAQ states there were four criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. The PAQ further reports that all four were notified, verbally or in writing of the results of the investigation.

Provision (b)

Outside entities do not conduct investigations for the agency or the facility.

Provision (c)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 17, B/C, 1-4, indicates following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the inmate (unless the agency has determined that the allegation is unfounded) whenever:

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

related to sexual abuse within the facility.

The PAQ reflects there have been zero substantiated or unsubstantiated allegations of sexual abuse committed by a staff member against an inmate in an agency facility in the past 12 months.

Provision (d)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 17, D, 1-2, indicates following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever:

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

Provision (e)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 17, D, states that all notification to inmates must be documented. This was confirmed by investigative staff and the PCM>

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets the standard regarding reporting to inmates. No recommendations or corrective action.

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> </ul> <p>Interview with the following:</p> <ul style="list-style-type: none"> <li>• Investigative Staff</li> </ul> <p>Provision (a)</p> <p>JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 17-18, Procedure #13, A, 1, indicates staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>Provision (b)</p> <p>The PAQ states there were zero staff from the facility who have violated agency sexual abuse or sexual harassment policies in the past twelve months. Additionally three were zero staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies</p> <p>Provision (c)</p> <p>JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp 17-18, Procedure #13, A, 2, indicates the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.</p> <p>The PAQ reflects there have been zero staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse)</p> <p>Provision (d)</p> <p>JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management</p>

and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp 17-18, Procedure #13, A, 3, indicates 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.

The PAQ reflects zero staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies:

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding disciplinary sanctions for staff. No recommendations or corrective action.

**115.77 Corrective action for contractors and volunteers**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interview with the following:

- Detention Center Director
- PREA Coordinator (PC)

Provision (a)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 18, Procedure #13, B, 1-3, indicates agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 18, Procedure #13, B, 1-3, indicates any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates

The PAQ reflects there have been zero contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates. Likewise there has been zero contractors or volunteers who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

Provision (b)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 18, Procedure #18, B, 1-3, indicates the facility takes appropriate remedial measures and considers 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.

The PAQ states there were zero staff from the facility who have violated agency sexual abuse or sexual harassment policies in the past twelve months. Additionally three were zero staff from the facility who have been terminated (or resigned prior to

termination) for violating agency sexual abuse or sexual harassment policies

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding corrective action for contractors and volunteers. No recommendations or corrective action.



**115.78 Disciplinary sanctions for inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021

Interview with the following:

- Detention Center Director
- Medical Staff

Provision (a)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 17-18, Procedure #13, C, and JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, pp. 2-3, Procedure #2, A-F, indicates Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse

JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, pp. 2-3, Procedure #2, B, states Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.

The PAQ reports the facility had zero administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility, in the past twelve months.

The PAQ reports the facility had zero criminal findings of inmate-on-inmate sexual abuse that have occurred at the facility, in the past twelve months.

Provision (b)

JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, p. 2, Procedure #2, indicates sanctions must 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

During the interview with the Detention Center Director, disciplinary sanctions were discussed. The Detention Center Director indicated inmate discipline is based on the level of the violation. Penalties are imposed comparable to other inmate's penalties. Penalties might include change of housing assignment, loss of good time credit, and possible prosecution, when appropriate.

Provision (c)

The PAQ indicates when determining what types of sanction, if any, should be imposed, the disciplinary process should consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior.

During the interview with the Detention Center Director, disciplinary sanctions were discussed. The Detention Center Director indicated if the inmate has a mental history, mental health staff will be involved to assist in determining appropriate sanctions.

Provision (d)

JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, p. 3, Procedure #2, D, states If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

During interviews with medical staff, the Auditor was informed that medical staff can make recommendations for referrals for inmates for therapy, counseling, or other interventions to address underlying issues related to abuse. The inmate's issues would be addressed during regular counseling sessions or group counseling sessions. Participation in interventions is not a condition for access to other programming or benefits.

Provision (e)

The PAQ reflects the facility only disciplines inmates for sexual contact with staff when it is determined the staff member did not consent.

JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, p. 3, Procedure #2, indicates the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

Provision (f)

The PAQ reflects the facility prohibits disciplinary action for a report of sexual abuse made in good faith.

JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, p. 3, Procedure #2, F indicates The 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 establish evidence sufficient to substantiate the allegation.

During an interview with Detention Center Director, the Auditor was informed in the past twelve months there had not been any disciplinary action taken against any inmate(s) for a report of sexual abuse made in good faith.

Provision (g)

The PAQ indicates the facility prohibits all sexual activity between inmates. Further, it states the facility only considers sexual activity between inmates to be sexual abuse if it is coerced.

JRLDC Policies and Procedures, Chapter 500.00, Inmate Programs, Activities and Discipline Policy 500.0, Inmate Discipline, revised 3/1/2021, pp. 2-3, Procedure #2, E and p. 12 Attachment A. state the agency prohibits all sexual activity between inmates. The agency deems sexual activity between inmates constitute sexual abuse only if it determines that the activity is coerced

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding disciplinary sanctions for inmates. No recommendations or corrective action.

**115.81**

**Medical and mental health screenings; history of sexual abuse**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 200.0 Intake/Booking, Policy 206.0, PREA Intake Screening Risk of Victimization, Policy 206, revised May 30, 2015

Interview with the following

- Medical and Mental Health Staff
- Intake Staff
- PREA Coordinator (PC)

Provision (a)

The PAQ reflects in the past twelve months, all inmates at the facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner. These referrals are made within 14-days.

Through the interview process, the PC stated at intake there is an initial medical screening completed. From this initial screening the appointment is made for the 14-day health screening. This screening is done by a contract medical professional from Mediko Inc. This is documented on Correctek Medical fourteen-day Health Assessment Form.

Intake staff indicated inmates are offered a follow-up meeting with a mental health professional, within 14-days of intake, if the intake screening indicates the inmate is at high risk for possible victimization, aggressiveness or has a history of victimization.

During the documentation review, the Auditor discovered all mental health referrals, because of disclosure during intake, were timely made. All referrals were evaluated within the appropriate time frame.

Provision (b)

JRLDC Policies and Procedures, Chapter 200.0 Intake/Booking, Policy 206.0, PREA Intake Screening Risk of Victimization, Policy 206, revised May 30, 2015, pp. 2-3, Procedure #2 states 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 ensure that the inmate is offered a

follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Intake staff indicated inmates are offered a follow-up meeting with a mental health professional, within 14-days of intake, if the intake screening indicates the inmate is at high risk for possible victimization, aggressiveness or has a history of victimization.

During the documentation review, the Auditor discovered all mental health referrals, because of disclosure during intake, were timely made. All referrals were evaluated within the appropriate time frame.

Provision (c)

JRLDC Policies and Procedures, Chapter 200.0 Intake/Booking, Policy 206.0, PREA Intake Screening Risk of Victimization, Policy 206, revised May 30, 2015, pp. 2-3, Procedure #2 states 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 ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Provision (d)

The PAQ indicates the facility strictly limits information obtained in intake screening relating to sexual abuse to those who need to make management, security, or treatment plan decisions.

The Auditor interviewed staff who conduct intake screenings and was informed that all medical and mental health records are contained in a separate and secure database. This database is accessed only through medical or mental health staff, and information is only provided to classification and high-level staff on a need-to-know basis.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 12-13, G, 1-2, states information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to who has access to it.

Provision (e)

According to the PAQ, 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.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding medical and mental health screenings, history of sexual abuse. No recommendations or corrective action.

**115.82 Access to emergency medical and mental health services**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 200.0 Intake/Booking, Policy 206.0, PREA Intake Screening Risk of Victimization, Policy 206, revised May 30, 2015

Interview with the following

- Medical and Mental Health Staff
- PREA Coordinator (PC)

Provision (a)

Medical and mental health staff reported treatment is provided immediately and is based on their professional judgment. Medical and Mental Health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

The Auditor reviewed records of inmates who alleged sexual abuse and in each case the inmate was referred to medical and mental health well within the appropriate time frame.

Provision (b)

Through the interview process, medical staff reported that upon arriving at medical after a report of sexual assault, an inmate will get a cursory examination by the physician to provide feedback for use of SART or if the inmate should be immediately transported to a hospital due to the nature of his injuries. If the SART is utilized, before leaving the facility, the nurse will provide 'recommendations' for treatment and care. The facility physician will complete the orders. As part of the process, the inmate receives information about sexually transmitted infection prophylaxis and other necessary care information.

The PAQ indicates 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?

Provision (c)

As previously cited in Provision (b) Medical and Mental Health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, PP. 15-16, Procedure #11, B, 3, states inmate victims of sexual abuse while incarcerated are 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.

Provision (d)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, PP. 15-16, Procedure #11, B, 3, states treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was confirmed with the PC

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets the standard regarding access to emergency medical and mental health services. No recommendations or corrective action.

115.83

**Ongoing medical and mental health care for sexual abuse victims and abusers**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- JRLDC Policies and Procedures, Chapter 200.0 Intake/Booking, Policy 206.0, PREA Intake Screening Risk of Victimization, Policy 206, revised May 30, 2015

Interview with the following

- Medical and Mental Health Staff

Provision (a)

The PAQ indicates the facility offers 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.

The Auditor reviewed records, produced by the facility, documenting the community standard of care, the evidence of sexually transmitted Infection testing, prophylaxis treatment, psychiatry and psychology services, crisis intervention. These services are free of charge to inmates regardless of whether the abuser is named or whether the inmate cooperates with an investigation.

Medical and mental health staff reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 15-16, Procedure #11, D, indicates the facility will 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.

Provision (b)

Through the interview process, medical staff reported that upon arriving at medical after a report of sexual assault, an inmate will get a cursory examination by the



physician to provide feedback for use of SART or if the inmate should be immediately transported to a hospital due to the nature of his injuries. If the SART is utilized, before leaving the facility, the nurse will provide 'recommendations' for treatment and care. The facility physician will complete the orders. As part of the process, the inmate receives information about sexually transmitted infection prophylaxis and other necessary care information.

The PAQ indicates 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.

#### Provision (c)

As previously cited in Provision (b) Medical and Mental Health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, PP. 15-16, Procedure #11, B, 3, states inmate victims of sexual abuse while incarcerated are 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.

#### Provision (d)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, PP. 15-16, Procedure #11, B, 3, states treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was confirmed with the PCM.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 16, Procedure #11, E, indicates female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests

#### Provision (e)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 16, Procedure #11, E, indicates if pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.

#### Provision (f)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 16, Procedure #11, E, indicates inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

Provision (g)

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 16, Procedure #11, B, 3, indicates Treatment services are 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.

Provision (h)

N/A - Facility is not a prison.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims and abusers. No recommendations or corrective action.

**115.86 Sexual abuse incident reviews**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Detention Center Director
- PREA Coordinator (PC)
- Incident Review Team (IRT)

Provision (a)

The PAQ indicates the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded. This is outlined in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 18-19, Procedure #14, A-D,

The Incident Review Team Roster confirms the make-up of the Incident Review Teams is consistent with the requirements of this standard.

Provision (b)

The PAQ reflects in the past twelve months, there were zero criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents. All investigations in the past twelve months were unfounded. This information was confirmed by the PC.

Provision (c)

The PAQ reflects that the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioner

The facility Incident Review Team Roster confirms the make-up of the Incident Review Team is consistent with the requirements of this standard.

During the interview process, the Warden confirmed her understanding of the composition of the review team and her willingness to consider and incorporated

recommendations from team members

Provision (d)

According to the PAQ, the facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager.

Members of the Sexual Abuse Incident Review Team were interviewed. Each team member reported the team considers all criteria listed above, as required by PREA policy.

The report from the Sexual Abuse Incident Review team is submitted to the Detention Center Director and the PC.

Provision (e)

According to the PAQ, the facility implements the recommendations for improvement or documents its reasons for not doing so.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding sexual abuse incident reviews. No recommendations or corrective action.

**115.87 Data collection**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020

Interviews:

- Detention Center Director
- PREA Coordinator (PC)
- Incident review Team (IRT)

Provision (a)

According to the PAQ, the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 3, Procedure #1, B, mandates the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument. The definitions are found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, pp. 2-3, Definition #6, A.

A review of the 2020 annual PREA report, confirms this provision has been met.

Provision (b)

According to the PAQ the agency aggregates the incident-based sexual abuse data at least annually. This was confirmed by the Detention Center Director.

Provision (c)

According to the PAQ, 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. This mandate is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020. JRLDC PREA Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 4, E.

Provision (d)

According to the PAQ, the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. This is found in JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 4, F.

Provision (e)

N/A - the facility does not contract for the confinement of its inmates. Therefore, this provision does not apply.

Provision (f)

The PAQ indicates the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding data collection. No recommendations or corrective action

**115.88 Data review for corrective action**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation
- J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020
- Most Recent Annual PREA Report

Interviews:

- Detention Center Director
- PREA Coordinator (PC)

Provision (a)

According to the PAQ, the agency reviews data collected and aggregated pursuant to §115.87 to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies.

JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, indicates the facility will collect, maintain and report statistics and information related to PREA incidents, programs, and activities, to include documentation and data related to corrective action plans as required under the PREA Standards 115.87(a) - (f) and 115.88(a) - (d) and 115.89(a) - (d)

As part of the interview with the PC, the Auditor learned the agency reviews data collected pursuant to §115.87 and assesses the effectiveness of the sexual abuse prevention, detection and response policies, practices, and training. The agency prepares an annual report and posts the information on the website.

The Detention Center Director asserts if the incident-based sexual abuse data shows patterns, such as LGBTI inmates are being targeted or a significant number of assaults occurring in a particular area of an institution, then policies, procedures or training may be modified.

Provision (b)

Through the interview process, the Auditor learned the facility reviews data collected to assess and improve the effectiveness of the sexual abuse prevention, detection and response policies, procedures, and training by; identifying problematic issues; taking corrective action on an ongoing basis; and preparing annual reports of findings and corrective action, if applicable.

The Auditor reviewed the most recent annual report and found it to follow the PREA standards, including a comparison to the findings in previous reports to assess progress in addressing sexual abuse.

Provision (c)

This provision is addressed in provision (a) and (b).

According to the interview with the Detention Center Director, all PREA Annual Reports are reviewed before placement on the agency website.

As required by standard, the facility places all annual reports on its website, accessible for public view <https://www.horrycountysc.gov/departments/sheriffs-office/detention-ce>

center allows access to the facility PREA webpage, which contains the most recent annual report.

Provision (d):

According to the PAQ, the annual report is written without personal identifying information (PII). However, if PII is in the report, it would be redacted prior to be published on the agency website. Additionally, the agency does have the ability to make any changes that are required.

The PC indicated the agency reviews data collected pursuant to §115.87. The annual report is written without PII and in the event PII is included, it is redacted prior to publishing on the agency website.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding data review for corrective action. No recommendations or corrective action.



<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> <li>• Most Recent Annual PREA Report</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Detention Center Director</li> <li>• PREA Coordinator (PC)</li> </ul> <p>Provision (a)</p> <p>JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020, p. 4 G, indicates the agency ensures that incident-based and aggregate data are securely retained.</p> <p>Through the interview process, the Auditor learned there are several locations where the facility retains data. At the local level, data is retained within a secure system and access to the system is limited to those staff with a need to know. Additional data is retained at the Agency level as required for completion of the SSV-2, and within the facility website for public access.</p> <p>Provision (b)</p> <p>The facility webpage provides reports relative to sexual abuse data and can be accessed at <a href="https://www.horrycountysc.gov/departments/sheriffs-office/detention-center">https://www.horrycountysc.gov/departments/sheriffs-office/detention-center</a></p> <p>Provision (c)</p> <p>During an interview with the PC, the Auditor was made aware the department reviews data collected pursuant to §115.87, and that reports are written in such a way that no information must be redacted. The department report reviewed by the Auditor met PREA compliance standards.</p> <p>Provision (d):</p> <p>JRLDC Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020 indicates</p>

the facility will maintain all collected data related to sexual abuse incidents, recommendations, and corrective action plans for at least ten (10) years.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding data storage, publication, and destruction. No recommendations or corrective action.

115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>• J. Reuben Long Detention Center (JRLDC) Policies and Procedures, Chapter 100.00, Agency Administration, Management and Training Policy 108.0, Prison Rape Elimination Act, revised 4/20/2020</li> <li>• JRLDC publicly accessible website <a href="https://www.horrycountysc.gov/departments/sheriffs-office/detention-center">https://www.horrycountysc.gov/departments/sheriffs-office/detention-center</a></li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Detention Center Director</li> <li>• PREA Coordinator (PC)</li> </ul> <p>Provision (a):</p> <p>The Detention Center Director reported the facility was last audited in 2018. A copy of the 2018 audit report is on the facility website for public information and review.</p> <p><a href="https://www.horrycountysc.gov/departments/sheriffs-office/detention-center">https://www.horrycountysc.gov/departments/sheriffs-office/detention-center</a></p> <p>Provision (b):</p> <p>During an interview with the PC, the Auditor learned the audit for was in the first year of the audit cycle. The facility webpage provides reports relative to sexual abuse data from the various facilities in accordance with PREA standards.</p> <p>Provision (c):</p> <p>N/A</p> <p>Provision (d):</p> <p>N/A</p> <p>Provision (e):</p> <p>N/A</p> <p>Provision (f):</p> <p>N/A</p>

Provision (g):

N/A

Provision (h):

During the on-site portion of the audit, the Auditor had complete, unimpeded access to every area of the facility. Throughout the on-site portion of the audit the PCM was available to accompany the auditor and give her complete access to any part of the facility she requested to see.

Provision (i):

At all times throughout the audit process, facility staff provided the Auditor with all requested information in a timely and complete manner.

Provision (j):

N/A

Provision (k):

N/A

Provision (l):

N/A

Provision (m):

The Auditor was provided a secure, private space to conduct all interviews during the on-site portion of the audit.

Provision (n):

During inmate interviews, all inmates reported they were provided the opportunity to send out confidential mail or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.

Provision (o):

N/A

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard frequency and scope of audits. No recommendations or corrective action.

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <ul style="list-style-type: none"> <li>• JRLDC publicly accessible website <a href="https://www.horrycountysc.gov/departments/sheriffs-office/detention-center">https://www.horrycountysc.gov/departments/sheriffs-office/detention-center</a></li> </ul> <p>Provision (f):</p> <p>The facility webpage provides multiple reports relative to sexual abuse data in accordance with PREA standards. Data can be accessed at:</p> <p><a href="https://www.horrycountysc.gov/departments/sheriffs-office/detention-center">https://www.horrycountysc.gov/departments/sheriffs-office/detention-center</a></p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the facility meets every provision of the standard regarding audit contents and findings. No recommendations or corrective action.</p>

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

<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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.)	yes

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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need	yes



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

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

<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who 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 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes



<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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

<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

<b>115.33 (a) Inmate education</b>		
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b) Inmate education</b>		
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c) Inmate education</b>		
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d) Inmate education</b>		
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and 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 prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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



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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

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

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

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

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

<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no



<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

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

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes



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 of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations 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, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na

<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes

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

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

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



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

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

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

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

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

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