

PREA Facility Audit Report: Final

Name of Facility: J.M. Chick Buckbee Juvenile Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/22/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Natasha Shafer-Mitchell	Date of Signature: 07/22/2018

AUDITOR INFORMATION	
Auditor name:	Shafer, Natasha
Address:	
Email:	nshaferdu@gmail.com
Telephone number:	
Start Date of On-Site Audit:	05/18/2018
End Date of On-Site Audit:	05/18/2018

FACILITY INFORMATION	
Facility name:	J.M. Chick Buckbee Juvenile Center
Facility physical address:	144 Jerry Lane, Augusta, West Virginia - 26704
Facility Phone	304-496-1341
Facility mailing address:	
The facility is:	<input type="radio"/> County <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
Facility Type:	<input checked="" type="radio"/> Detention <input type="radio"/> Correction <input type="radio"/> Intake <input type="radio"/> Other <input type="text"/>

Primary Contact			
Name:	Tim Harper	Title:	PREA Coordinator
Email Address:	Timothy	Telephone Number:	304-558-9800

Warden/Superintendent			
Name:	Barbara Spaid	Title:	Facility Director
Email Address:	Barbara.A.Spaid@wv.gov	Telephone Number:	304-496-1341

Facility PREA Compliance Manager			
Name:		Email Address:	

Facility Health Service Administrator			
Name:	Sherry Quasney	Title:	RN Health services administrator
Email Address:	Sherry.A.Quasney@wv.gov	Telephone Number:	304 4961341

Facility Characteristics	
Designed facility capacity:	24
Current population of facility:	22
Age range of population:	12-20
Facility security level:	Detention/Medium
Resident custody level:	Detention/Medium
Number of staff currently employed at the facility who may have contact with residents:	43

AGENCY INFORMATION	
Name of agency:	West Virginia Division of Juvenile Services
Governing authority or parent agency (if applicable):	WV Department of Military Affairs and Public Safety
Physical Address:	1200 Quarrier Street, Charleston, West Virginia - 25301
Mailing Address:	
Telephone number:	304-558-9800

Agency Chief Executive Officer Information:			
Name:	William K. Marshall III	Title:	Director
Email Address:	William.K.Marshall@wv.gov	Telephone Number:	304-558-9800

Agency-Wide PREA Coordinator Information			
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Name:	Tim Harper	Email Address:	Timothy.V.Harper@wv.gov
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AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Prison Rape Elimination Act audit of the J.M. Chick Buckbee Juvenile Center, located in Augusta, West Virginia was conducted by Natasha Shafer-Mitchell a United States Department of Justice Prison Rape Elimination Act certified juvenile facility auditor on May 18, 2018. The auditor utilized the assistance of a non-certified support staff member to review resident risk assessments and staff background clearance documentation during the on-site audit.

The mission statement for the West Virginia Division of Juvenile Services states, "The West Virginia Division of Juvenile Services is committed to balancing community safety and the positive development of youth in the Juvenile Justice System by utilizing best practices in providing effective community, family and residential services that are individualized and promote positive behavioral change and accountability."

The on-site audit began with a meeting with the facility leadership, which was intended to make introductions, explain the on-site audit process, and answer any questions. In attendance was the facility Superintendent, agency PREA Coordinator, and facility PREA Compliance Manager.

The auditor was escorted on a tour with the facility leadership team and the agency PREA Coordinator. The tour consisted of walking the entire internal area of the facility and accessing the common areas. During the tour the auditor observed the strategic locations of the facility cameras, classrooms, administrative area, intake, medical clinic, control, restrooms, mechanical closets, storage space, staff lounge, and facility maintenance area. While touring the facility, the auditor observed the PREA audit notices posted throughout the facility. During the tour the auditor did not hear or observe female staff announce themselves as they were entering the housing units. The auditor entered the residents rooms and noticed every room has a toilet and sink. The staff and residents explained the use of the toilet involves staff member allowing the resident into their rooms during day programming to relieve themselves. All of the residents explained when they have to urinate they sometimes cover their windows with the privacy magnet that hangs on their door and provides privacy, or they position their bodies in a manner that prevents anyone who looks into the window from watching them. The residents explain they have the ability to cover their windows with the magnet covers when they want privacy or they can knock and ask staff to cover the windows. The auditor noted the shower rooms have a single shower and provide the residents with adequate privacy. The auditor had limited access to the facility as a result of the security measures but was allowed to move throughout the facility unescorted to make additional observations. During the tour the auditor would engage with the residents to assess their knowledge of PREA.

The auditor was provided with a private room to conduct all interviews. While conducting the agency audit and the J.M. Chick Buckbee Juvenile Center the auditor interviewed the agency Director, PREA Coordinator/Investigator, Human Resource representative, Contract monitoring staff, staff who perform

screening for risk of victimization and abusiveness, staff on the incident review team, designated staff member charged with monitoring retaliation, and intake staff. Random staff interviews included security staff from all shifts. The interviews included 10 resident interviews; of those interviewed 1 (one) resident was identified as having a disability, 1 (one) reported sexual abuse while confined in the facility, and 1 (one) was placed in seclusion after being identified as a perpetrator of sexual misconduct while in the facility. All interviews were conducted using the DOJ interview protocols to ascertain the staff and residents knowledge of the agency's zero tolerance policy, PREA knowledge, and agency and facility reporting methods.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The J.M. Chick Buckbee Juvenile Detention Center is located in a rural area of Augusta, West Virginia. The facility was originally constructed in 2003. The facility has a rated bed capacity of twenty-four (24) beds, with a current population listed at the time of the on-site visit of twenty (20) male residents. The hardware-secure facility houses male and commitment and detention residents. The facility has three (3) male one story housing unit that provides direct supervision style. The intake area and segregation rooms are separate from the housing units.

J.M. Chick Buckbee Juvenile Detention Center provides several facility programming elements, which includes, but is not limited to the following: medical services, behavioral health services, assessments and counseling, education, recreation, religious services, library, case management and groups. The facility treatment staff provides groups counseling sessions as well as being available to residents on a one-to-one basis for any individual counseling needs. The facility has a staffed medical department, which is currently holds a NCCHC accreditation and provides daily nurse sick calls as well as visits from the facility physician twice weekly.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	0
Number of standards met:	43
Number of standards not met:	0

The J.M. Chick Buckbee Juvenile Center is responsible for complying with all 43-juvenile facility PREA standards. The facility is found to be compliant with forty-one (41) standards. Interviews with residents and staff indicate they received adequate training and information regarding zero tolerance for sexual abuse and sexual harassment, residents rights, and the numerous reporting methods. The facility has an extensive video monitoring system with cameras located throughout the interior and exterior of the facility, this includes the units, hallways, entrance and exit doors, and gyms.

The facility's prevention efforts include zero-tolerance of sexual abuse and sexual harassment evidenced by policy, documentation, and the responses to the interview questions; the developed staffing plan intended to protect residents from sexual abuse; and prohibiting cross-gender pat and strip searches. The facility conducts unannounced rounds once per months on each shift. Policy requires someone with management responsibilities conduct the unannounced rounds.

Evidence of responsive planning includes training of investigators. The facility did not receive a sexual abuse allegation requiring a forensic medical examination, but facility protocol demonstrates the residents would be transported outside of the facility to Sarah's House. The facility reported zero (0) sexual abuse allegations on the Pre-Audit Questionnaire.

Annual training for staff includes PREA specific topics. One module the facility was advised to focus on during the current training calendar year is module #9. The agency was advised to have the staff participate in the NIC ecourse. Resident PREA education occurs during intake during the facility's orientation and the information is presented by staff. Interviews with the residents indicated the residents view PREA information specifically how to report incidents of sexual abuse and sexual harassment within 10 days of intake.

Number of standards exceeded: 0

Number of standards met: 43

Number of standards not met: 0

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

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Review:</p> <ol style="list-style-type: none"> 1. Agency Organization Chart 2. Policy 151.00 Prison Rape Elimination Act (PREA) 3. Policy 138.00 Progressive Discipline 4. Policy 103.00 Table of Organization <p>The PREA Coordinator states he has sufficient time and authority to perform his duties. An interview with the Facility Compliance Manager indicated that she is very knowledgeable of the PREA Standards as well as the agency policies and facility procedures. She also reports she has adequate time to perform her duties and worked closely with the PREA Coordinator to sustain compliance.</p>

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Review:</p> <ol style="list-style-type: none"> 1. State of West Virginia Master Agreement 2. Policy 104.00 Roles of Outside Agencies <p>The West Virginia Department of Military Affairs & Public Safety, Division of Juvenile Services has a contract with one (1) contract program. That specific facility complies with the agency policies and is participating in a PREA audit during the 2017-2018 audit year of the second audit cycle.</p>

115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Review:</p> <ol style="list-style-type: none"> 1. Policy 128.00 Staffing Requirements 2. Policy 303.00 Patrols and Inspections 3. Operational Procedure 1.28-00 Staffing Requirements 4. Operational Procedure 3.03-00 Patrols and Inspections 5. Memo 6. PREA Staffing Plan Review dated 3/8/18 7. CBJC Unannounced Rounds for 2017-2018 <p>The J.M. Chick Buckbee Juvenile Center designed facility capacity is 24 residents. The facility direct care staffing plan is based on a staffing ratio of 1:8 during waking hours and 1:16 during sleeping hours. The facility consistently meets the staffing ratios as per the PREA standards and will fill positions as-needed when vacancies become available. The staffing plan considers the population of youth served, numbers and placement of supervisory staff, state or local laws, regulations, or standards, and the prevalence of substantiated and unsubstantiated incidents of sexual abuse. The staffing plan was completed and reviewed by the facility director and the agency PREA Coordinator; the plan was signed by the reviewers on March 8, 2018. Vulnerabilities throughout the facility are mitigated by cameras installed in the admissions area, cafeteria, day area, sleeping quarters, kitchen, classrooms, laundry room, outside perimeter of the facility, confinement rooms, recreation area; the facility plan also indicates the staff have access to handheld cameras.</p>

115.315	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Review:</p> <ol style="list-style-type: none"> 1. Policy 308.00 Control of Contraband Allowable Items 2. Operational Procedure 3.08-00 3. Policy 500.00 Intake and Admissions 4. Operational Procedure 5.00-00 Intake and Admission 5. Policy 303.00 Patrols and Inspections 6. Operational Procedure 3.03-00 Patrols and Inspections 7. PREA Cross-gender training records from 2017 and 2018 <p>The J.M. Chick Buckbee staff are trained annually on the agency procedures on how to conduct searches on residents who identify as transgender or intersex. The staff explained the training objectives is to ensure staff know how to conduct the search in a manner that treats the residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs, as required by Standard 115.315(f).</p> <p>The facility met the standard during the on-site audit. The facility prohibits cross-gender pat searches, strip searches, and body cavity searches outright. It also has policy prohibiting searches or physical examination of transgender or intersex residents for the sole purpose of determining the resident's genital status.</p> <p>During resident interviews the practice of restroom use appears consistent when the residents are on their housing units they are allowed in their rooms to use the restroom. The residents consistently stated when they needed to go #1 (urinate) they would use the commode in their rooms and are allowed to cover their windows with the privacy covers or would position themselves in a manner that provided them with privacy. If they needed to go #2 (defecate) they would use the commode in their room and 100% of the time would cover their windows. The residents state when they are allowed in their rooms they close the door which secures the door, when done they will knock on the door to let staff know they have finished and staff immediately provide egress.</p> <p>The youth were inconsistent when asked if female staff announce their presence when entering the units, some youth admitted to not paying attention and expressed feeling they were provided with adequate privacy in their rooms and while in the bathroom taking a shower. The facility has signs posted on the entry door of the units informing the residents of opposite gender staff presence.</p>

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation reviewed:</p> <ol style="list-style-type: none"> 1. Policy 500.01 Reception and Orientation of New Juveniles 2. Policy 500.04 Resident Handbook 3. Operational Procedure 5.00-01 Reception and Orientation of New Juveniles 4. Operational Procedure 5.00.04Resident Handbook 5. WVCAN-CAC LEP Protocol 6. Memo from the Facility Director 7. MOU with a Certified American Sign Language Interpreter <p>The J.M. Chick Buckbee Juvenile Center provided the auditor with posters, signs, and resident handbooks in both English and Spanish. The interviews with staff and residents indicated there were zero (0) residents in the facility who were limited English speakers. In the instances where a resident who speaks any language other than English or Spanish the agency would provide interpreting services through the West Virginia Child Advocacy Network-Child Advocacy Centers Limited English Proficiency (LEP) Protocol. The agency and facility provides interpreting services for residents who may be deaf or hard of hearing, or has speech impairment. The policy states the facility take steps to ensure that residents with disabilities have equal opportunities to participate in an benefit from all agency efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p>

115.317	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 129.00 Conditions of Initial & Continued Employment 2. Policy 131.00 Selection and Promotion of Non-Correctional Officer Personnel 3. Policy 132.00 Competitive Promotion of Correctional Officer Personnel 4. Background Checks for 12 persons 5. Policy 311.00 Contractor Escorts and Security Protocol 6. Operational Procedures 3.11-00 Contractor Escorts and Security Protocol 7. PREA Background Check Schedule <p>The J.M. Chick Buckbee Juvenile Center policy disqualifies individuals from employment or from serving in a contract position if they have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or institution or if they have been criminally or civilly or administratively adjudicated to have engaged in sexual activity within the community facilitated by force, or overt or implied threats of force, or coercion or if the victim did not consent or was unable to consent or refuse. A review of staff hired within the past 12 months personnel files maintained background check and child abuse registry clearance documentation. The facility policy also ask all applicants and employees who may have contact with residents directly, about previous misconduct as described in paragraph (a) of the policy section of this document, in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. Employees incur a continuing affirmative duty to disclose any misconduct as listed in paragraph (a) of the policy section of this document. Material omissions regarding sexual misconduct, or the provision of materially false information, are grounds for termination. The facility provided a document indicating the 5-year background check for CBJC will be conducted July 2019.</p>

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 202.00 Facility Planning Requirements 2. Policy 206.00 Security Surveillance 3. Operational Procedure 2.02-00 Facility Planning Requirements 4. Operational Procedure 2.06-00 Security Surveillance <p>Currently the facility has single-occupancy rooms available for residents the facility has deemed vulnerable: juveniles with severe medical disabilities, juveniles suffering from serious mental illness, sexual predators, juveniles likely to be exploited or victimized by others, and juveniles who have other special needs for single housing. The facility staffing plan indicates the facility has installed 48 cameras throughout the facility, which are strategically placed throughout the facility in admissions, cafeteria, day area, exterior sleeping quarters, kitchen, classrooms, laundry, outside perimeter, exterior to the confinement rooms, recreations area, and other areas. The facility will install additional cameras in areas identified as vulnerable as funding becomes available.</p>

115.321	<p>Evidence protocol and forensic medical examinations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. The ChildFirst Forensic Interview Protocol 2. Policy 324.00 Crime Scene and Physical Evidence Preservation 3. Policy 413.00 Medical Care & Emergency Medical Procedures 4. Operational Procedure 4.13-00 Medical Care & Emergency Medical Procedures 5. MOA Sarah's House Child Advocacy Center 6. MOA between DJS-FRIS and RCCS through 6-30-19 <p>The West Virginia State Patrol is the agency responsible for conducting criminal investigations, they would investigate all sexual abuse allegations. Criminal investigations would be conducted according to standard investigatory protocols established with the law enforcement agency.</p> <p>All allegations that could potentially be criminal are referred to the local law enforcement agency. If the responding officer determines there is enough evidence based on their initial interviews to move the case forward; the officer would refer the allegation for further investigation. The decision to pursue criminal charges is determined by the responding officer. The PAQ provided to the auditor indicated there have been zero (0) allegations of sexual abuse that required a forensic examination or the services of an advocate for emotional support.</p> <p>The facility medical staff indicated residents who might require a forensic examination would be transported to Sarah's House of Child Advocacy Center where SANE exams are provided. Additionally, Sarah's House would provide testing, STD Prophylaxis and options as medically determined. The J.M. Chick Buckbee Juvenile Center medical staff would be able to provide testing, STD Prophylaxis, and additional follow-up care as indicated by written discharge orders from the center.</p>
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115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. 151.00 PREA 2. 111.00 CORR OPS 3 DMAPS Investigations Unit Policy <p>The J.M. Chick Buckbee Juvenile Center policy requires the facility to conduct internal reviews for non-criminal behavior and only when the safety or welfare of the resident is not jeopardized. The facility will not conduct its own criminal investigations for allegations of sexual abuse and sexual harassment, and shall be immediately referred to the West Virginia State Patrol. The West Virginia Division of Juvenile Services in conjunction with the facility conduct Administrative Investigations for allegations of sexual abuse and sexual harassment. The administrative investigator will provide in writing, a report of findings and conclusion to the Facility Administrators for appropriate discipline. The agency uses a preponderance of the evidence evidentiary standard when conducting administrative investigations to determine where allegations of sexual abuse or sexual harassment are substantiated. The agency website has information for reporting allegations of abuse. The website states, "If you have been assaulted or witness an assault, but you are unwilling to report it to DJS staff, you may fill out a grievance form write a note request to see the nurse or counselor you may use the Confidential PREA box that is only accessed by Central Office staff (checked every 14 days) see your Counselor to call the DJS Hotline @ 1-800-368-2780 ext. 2020."</p> <p>Interviews with administrators, specialized and direct care staff confirmed that staff are knowledgeable of reporting requirements and procedures and all acknowledged they are mandated reporters.</p>

115.331	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 162.00 Training and Staff Development 3. PREA Lesson Plan 2018 4. Tips for Handling Disclosures 5. Adolescent Development Lesson Plan 6. Cultural Diversity Lesson Plan 7. Youth Workers Handbook NIC 8. Certificate of Understanding 9. Training Logs for 2018 10. Policy 324.00-2 Crime Scene Response Procedures 11. Policy 335.00 Facility Child Abuse and Neglect 12. IPC- Interpersonal Communications in the Correctional Setting <p>The J.M. Chick Buckbee Juvenile Center policy requires that employees, volunteers and contract workers are trained in the 11 modules identified in 115.331. The facility provided the auditor with employee training logs and documentation from August 2017. New employee education involves the employee receiving a 3 hour and 30 minute training, which includes complying with policies and watching a PREA video. The reviewed training curriculum was developed by the agency Correctional Program Specialist and the PREA Compliance Manager, the training included all modules and adequately address each of the 11 topics.</p> <p>The facility should expand on LGBTQI training by requiring all employees and future employees to participate in the NIC training ecourse: Respectful Communication with LGBTQI Youth. The facility and agency should partner with community LGBTQI activity, agencies, or experts to provide on-going training.</p> <p>Interviews with randomly selected staff representing all shifts indicated that all have received the required PREA training. Staff were aware of the Zero Tolerance policy, reporting procedures, their responsibilities as first responders, and staff and youth rights to be free from retaliation.</p>

115.332	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Volunteer Handbook 2. Signed Certificate of Understanding 3. Operational Procedure 1.67-00 Volunteers and Citizens Involvement <p>Reviewed the J.M. Chick Buckbee Juvenile Centers training policy and handbook for volunteers and contractors. The policy requires all volunteers, contractors and interns are required to acknowledge that they understand the zero tolerance of sexual abuse policy and how to report sexual abuse and sexual harassment. The participants sign a certificate of understanding that acknowledges they have read and understand the Prison Rape Elimination Act (PREA) Guide for Volunteers and Contractors.</p>

115.333	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. 151.00 PREA 2. CBJC Resident Education Excel Spreadsheet 3. Resident PREA Semi-Annual Training Logs <p>The J.M. Chick Buckbee Juvenile Center policy states residents, during the intake process shall receive information explaining the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The facility allowed the auditor to reviews files which demonstrated residents sign and date an acknowledgment form stating they have received information related to PREA. The policy also requires the facility to provide comprehensive age-appropriate education to residents within 10 days of intake. Based on interviews the youth receive information at intake and additional information when they meet with the facility Counselor.</p>

115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. NIC PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting training certificate 3. NIC PREA: Your Role Responding to Sexual Abuse training certificate 4. NIC PREA: Investigating Sexual Abuse in a Confinement Setting 5. Investigator Train-the-Trainer training 6. Policy 111.00 CORR OPS 3 DMAPS Investigations Unit Policy <p>The J.M. Chick Buckbee Juvenile Center provided the auditor with 6 NIC training certificates for the investigators assigned to the Department of Military Affairs and Public Safety (DMAPS) Investigations Unit.</p>

115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 162.00 Training and Staff Development 2. NIC PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting training certificate <p>The facility provided NIC training certificates for five (5) facility medical professionals confirming they completed the specialized training, "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting." Only portions of the training are applicable since the facility does not conduct SANE exams.</p>

115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 500.01 Reception and Orientation of New Juveniles 3. Operational Procedure 5.00-01 Reception and Orientation of New Juveniles 4. Policy 500.00 Intake and Admissions 5. Mental Health Intake Screening <p>The J.M. Chick Buckbee Juvenile Center conducts and documents an assessment of every resident at the time of intake or within 72 hours after a resident's arrival, as required per the facility policy. All staff and all residents interviewed confirmed this practice occurs. Residents are re-assessed at each new intake or return to the facility and any time circumstances dictate it is appropriate. The risk assessment tool contains all of the eleven (11) elements required by paragraph (c) of the standard. The staff member responsible for completing the risk assessment explained that in addition to completing the risk screening tool they review the resident's case file, and review any collateral information available.</p>

115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. 332.00 Specialized Housing Policy 2. 500.00 Intake and Admissions Policy 3. 151.00 PREA Policy <p>The risk screening assessment is utilized to identify potential vulnerabilities or tendencies to act out with sexually aggressive behavior and risk for sexual victimization. Each resident is housed in single housing units. An individual determination is made about how to ensure the safety of each resident.</p> <p>During the on-site audit visit the agency enhanced the policy to provide the agency/facility staff guidance when determining housing and placement decisions for residents' who identify as transgender. The agency will determine if the resident should be placed in a facility for male or female residents to ensure health and safety, whether the placement would present management or security problems, the resident's security threat level, criminal and disciplinary history, current gender expression, medical and mental health information, vulnerability to sexual victimization and likelihood of perpetrating abuse.</p>

115.351	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Resident Handbook updated 2-27-18 3. MOU Supreme Court 2/2017-8/2019 4. Policy 335.00 Facility Child Abuse and Neglect <p>The J.M. Chick Buckbee Juvenile Center provides multiple ways, internally and externally for residents to report allegations of sexual abuse, sexual harassment or retaliation. The residents can report to a staff member; fill out a grievance; write a note; request to see medical staff or a counselor; resident satisfaction survey upon their departure from the facility; or use the confidential PREA box that is only accessed by Central Office staff. The confidential box is checked every 14 days. The Department of Juvenile Services has also established a hotline; the residents would need to coordinate with their Counselor to call the hotline.</p> <p>During the on-site interviews the residents related if they had been the victim of sexual abuse or sexual harassment they would report it to a trusted staff or a parent/guardian. Every resident was able to relay the different methods of reporting and without being pressed could tell this auditor about the outside hotline.</p>

115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Memo explaining all grievances were satisfactorily completed well below the time allowed in the juvenile standards 3. Policy 332.00 Specialized Housing 4. Operational Procedure 3.32-00 Specialized Housing <p>The J.M. Chick Buckbee Juvenile Center policy provides for each resident with the right to formally express a grievance the resident may have, feel they have been mistreated, or feel their rights have been violated. The policy allows for an emergency grievance to be filed in the event the resident is subject to a substantial risk of imminent sexual abuse by contacting the Facility Administrator or designee. An initial response to an emergency grievance should be provided within 24 hours of submission, and a final decision should be made within 30 days. A memo submitted to the Auditor indicates resident grievances and PREA complaints were handled well below the allowed time frame and did not have to extend the time frame on grievance. The facility did not receive any grievances whereby a final decision was not made in the allotted time frame during the past 12 months.</p> <p>Of the residents interviewed zero (0) reporting filing a grievance to report sexual abuse or sexual harassment.</p>

115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 333.00 Resident Access to Courts and Counsel 2. Resident Handbook 3. MOA between DJS-FRIS and RCCS 4. MOA with Sarah's House Child Advocacy Center 5. Policy 509.00 Telephone, Mail & Publications 6. Operational Procedure 5.09-00 Telephone, Mail & Publications <p>The J.M. Chick Buckbee Juvenile Center provides residents with access to Harmony House to report abuse or sexual harassment privately and anonymously. Residents have access to outside agencies to make a report and the contact information is on the facility brochure and handbook, which includes the telephone number for the agencies.</p> <p>The policy also provides for resident communication by phone with legal representatives. Phone contact with a resident's legal representative is allowed upon resident request. Phone calls to attorneys or legal representatives have no limit; every resident reports the staff will ask if anyone needs to make a professional call during the day and will allow the resident to make the call. Residents have access to their parents/legal guardians by telephone and are allowed visits.</p>

115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 334.00 Juvenile Rights and Grievance Procedures 3. Operational Procedures 3.34-00 Juvenile Rights and Grievance Procedures <p>The J.M. Chick Buckbee Juvenile Center establishes methods to receive third-party reports of sexual abuse and sexual harassment on behalf of a resident, and the agency makes the information available on the agency website. Third-party reporting and grievances filed on behalf of residents or former residents will be entered into the Offender Information System and forwarded to the Facility Director. All response time timelines are based on the grievance procedures timelines.</p>

115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 334.00 Juvenile Rights and Grievance Procedures 3. Policy 335.00 Facility Child Abuse and Neglect 4. Operational Procedures 3.34-00 Juvenile Rights and Grievance Procedures 5. Operational Procedures 3.35-00 Facility Child Abuse and Neglect <p>The J.M. Chick Buckbee Juvenile Center policy, requires any person(s) providing services in the facility who receives information, regardless of its source, concerning sexual abuse or sexual harassment, or who have reason to suspect, or who observe an incident are required to immediately report the incident. The policy applies to employees, contractors, interns, and volunteers, or anyone else in a paid or unpaid capacity involved with or providing services at the facility. The policy details the responsibility to report suspected and actual abuse and neglect of residents. The staff are required to adhere to the child abuse reporting laws in West Virginia child protection laws and with applicable professional licensure requirements. Division employees are required to contact the Central Office Administrative Duty Officer and the Facility Director.</p> <p>Staff were able to share the multiple ways staff and residents could make reports of allegations of sexual abuse or sexual harassment. All staff were aware of their mandatory reporter responsibilities. None of the interviewed residents had reported an allegation of sexual abuse or sexual harassment but could identify the multiple ways of reporting should they need to make a report.</p>

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 332.00 Specialized Housing 2. Memo explaining immediate action to protect residents at risk of imminent sexual abuse <p>When or if staff at the J.M. Chick Buckbee Juvenile Center learn that a resident is subject to a substantial risk of imminent sexual abuse, they report they would take immediate action to protect the resident. Any staff with knowledge, suspicion, or information they receive that a resident is subject to a substantial risk of imminent sexual abuse shall maintain close supervision of the resident and notify the supervisor immediately. The facility indicated on the PAQ that they have not had any residents at the facility in the past 12 months who have been or reported being subject to a substantial risk of imminent sexual abuse.</p> <p>The Facility Director, PREA Compliance Manager and PREA Coordinator, explained actions they would take in the event a youth was subject to a substantial risk of imminent sexual abuse. The Facility Administrator indicated he would take action immediately by notifying the PREA Coordinator and working together to have the resident released/transferred from the facility. If the perpetrator is a staff member he would prohibit the staff member from accessing the facility or move the staff member while an investigation is being conducted. All interviewed residents denied that they had experienced any feelings of or actual risk of imminent sexual abuse at the facility and reported feeling safe.</p>

115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 335.00 Facility Child Abuse and Neglect 2. Operational Procedure 3.35-00 Facility Child Abuse and Neglect 3. Email correspondence dated January 2018 <p>The J.M. Chick Buckbee Juvenile Center policy defines how an allegation from another facility would be handled and processed by the receiving facility. Upon receiving an allegation that a resident was sexually abused or sexually harassed while confined at another facility, the Facility Administrator receiving the report would notify the agency PREA Coordinator who would contact the facility where the alleged abuse occurred, or the appropriate office of the agency where the alleged abuse occurred; and notify the appropriate state agency and a law enforcement agency with jurisdiction where the facility, in which the alleged abuse took place. The facility Director or designee shall immediately make this notification to the PREA Coordinator as soon as possible, and the PREA Coordinator shall make notification no later than 72 hours after receiving the allegation. All notifications shall be documented with date, time and details of the notification.</p> <p>According the facility PAQ the facility received zero (0) allegations that a resident was sexually abused in another facility or that a resident was sexually abused while at their facility.</p>

115.364	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 324.00 Crime Scene and Physical Evidence Preservation 3. Crime Scene Response Procedures <p>The J.M. Chick Buckbee policy covers every aspect of the standard to include requiring the staff to: separate the alleged victim and abuser; preserve and protect any potential crime scene until appropriate steps can be taken to collect any evidence.</p> <p>Staff were able to communicate effectively and make this auditor aware of their first responder duties and were able to relate the steps they would take as first responders.</p>

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <p>1. Policy 324.00 Crime Scene Response Procedures</p> <p>The J.M. Chick Buckbee Juvenile Center policy states; The Department shall maintain a written institutional plan to coordinate the actions taken in response to an incident of sexual abuse. This plan will serve to define the duties of each person involved in the post-allegation response to an incident. The plan includes the duties and actions of each member of the effort, including staff first responders, supervisory staff, medical staff, mental health professionals, and upper level management. The plan also includes coordination between staff and local law enforcement personnel, as well as state level agencies.</p> <p>The facility Administrative staff and specialized staff were well aware of their individual responsibilities in coordinating their responses to sexual abuse and were able to articulate each step of their first responder duties in a coordinated response. Direct care staff are well aware of their duty to take seriously any knowledge, suspicion, report or allegation of sexual abuse or sexual harassment and all of them indicated they would immediately notify their supervisor and make reports as required.</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <p>1. Memo explaining the agency/facility does not enter into collective bargaining agreements.</p> <p>The J.M. Chick Buckbee Juvenile Center does not participate in collective bargaining nor any other form of agreement which may limit the Department's ability to remove an alleged staff abuser from contact with residents pending the outcome of the investigation, and if necessary the extent to which disciplinary measures are applied.</p>

115.367	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <p>1. Policy 151.00 PREA</p> <p>The J.M. Chick Buckbee Juvenile Center policy is clear that the responsibility of the staff to protect all residents and staff who report sexual misconduct or cooperate with sexual misconduct investigations from retaliation by other residents or staff. All staff are responsible for monitoring for retaliation, but the agency PREA Compliance Manager is responsible for formally monitoring for retaliation where a resident or staff member is involved.</p>

115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <p>1. Policy 32.00 Specialized Housing</p> <p>2. Memo explaining in the past 12 month the facility had zero (0) incidents whereby a resident needed segregated housing to address sexual abuse or sexual harassment</p> <p>The J.M. Chick Buckbee Juvenile Center policy states; a resident can request and can be recommended for protective custody if they feel or the facility staff determine such specialized assignment is in the residents best interest.</p>

115.371	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. 151.00 PREA Policy 2. 111.00 CORR OPS 3 DMAPS Investigations Unit Policy 3. 111.00 Investigative Unit 4. 115.00 Records Management Program <p>The J.M. Chick Buckbee Juvenile Center policy states; Effective October 16, 2017 the West Virginia Department of Military Affairs and Public Safety implement a new policy and investigation unit to consolidate investigative services of the Division of Corrections (DOC), Division of Juvenile Services (DJS) and Regional Jail Authority (RJA) into a single, statewide unit. The DMAPS investigation unit is responsible for investigating criminal and administrative violations. Whenever an initiating authority believes that there is sufficient, credible information that a felony or serious misdemeanor has taken place, notification of the West Virginia State Police shall be made as soon as practicable.</p> <p>The Department shall not terminate an investigation solely because the source of the allegation recants the allegation.</p> <p>The Facility Administrator and PREA Coordinator indicated the agency investigation unit is responsible for investigating sexual abuse allegations and making a referral for prosecution.</p>

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA <p>The J.M. Chick Buckbee Juvenile Center policy explicitly states, all allegations of sexual misconduct will be taken seriously and investigated thoroughly by trained investigators. Investigations will be conducted in a timely manner and the investigator will impose no standards higher than a preponderance of the evidence. The facility has had zero (0) allegations of sexual abuse requiring an administrative investigation.</p>

115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. CBJC Investigative data 17-18 3. Signed Resident Notification <p>Following an investigation into a resident's allegation of sexual abuse suffered in a West Virginia Juvenile Services operated facility, the PREA compliance manager will make notification if it is a resident-on-resident complaint as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded, as well as any information they deem necessary to support the finding. For staff-on-resident complaints, the Director of Investigations will provide written notification to the resident. The facility PAQ states there have been zero (0) sexual abuse allegations requiring notification in the past 12 months.</p>

115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 138.00 Progressive Discipline 2. Memo <p>The J.M. Chick Buckbee Juvenile Center policy describes the agencies progressive discipline process. The policy explains certain staff offenses are so serious the response by the facility is to discharge the employee immediately. When making the decision the agency will consider: The seriousness of the offense, the employee's disciplinary and work records, the employee's length of service, the Department's past practice in similar or identical cases, and the circumstances surrounding the incident that are either mitigating (arguing for lesser penalties) or aggravating (those arguing for more serious disciplinary actions). The policy further states, Any employee who is dismissed from employment or resigns in lieu of dismissal for child abuse or child sexual abuse will be reported to law enforcement and any relevant licensing body.</p>

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 138.00 Progressive Discipline 3. Policy 311.00 Contractor Escorts and Security Protocol 4. Operational Procedure 3.11-00 Contractor Escorts and Security Protocol <p>The J.M. Chick Buckbee Juvenile Center policy states; The Department shall prohibit any contractor or volunteer, who engages in sexual abuse, from contact with residents and shall report the sexual abuse to the PREA Coordinator, relevant licensing bodies, and local law enforcement agencies, unless the activity was clearly not criminal. Violations of The Department policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse), by a contractor or volunteer, shall result in the facility taking appropriate remedial measures, and may result in a prohibition of contact with residents. The Department holds all contractors, interns, and volunteers to higher level of of ethics, and any breach of those ethics or other infractions may result in termination of his or her services with the Department.</p> <p>The facility has had zero (0) allegations resulting in disciplinary sanctions for contractors or volunteers.</p>

115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 330.00 Resident Discipline 2. Policy 332.00 Specialized Housing 3. Operational Procedures 3.32-00 Specialized Housing <p>A resident is subject to disciplinary sanctions in accordance with formal disciplinary procedures following an administrative finding that the resident engaged in resident-on-resident sexual abuse or a criminal finding that the resident engaged in resident-on-resident sexual abuse.</p> <p>The facility has had zero (0) allegations of resident-on-resident sexual abuse allegations resulting in disciplinary sanctions.</p>

115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2 Intake Mental Health Screening and Assessment 3. JSOAP Standard 4. Prime care 1 - Master Problem List 5. Prime care 2 - Receiving Screening/Health Assessment 6. Policy 335.00 Facility Child Abuse and Neglect 7. 25 Confidential PREA Related Information <p>The J.M. Chick Buckbee Juvenile Center policy states; a risk screening shall be conducted on each resident within seventy-two (72) hours after admission into the facility. In determining if the resident is in need of referral when a resident has a history of sexual victimization or perpetration, the staff shall consider the results of the screening tool.</p>

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 413.00 Medical Care & Emergency Medical Procedures 2. Operational Procedures 4.13-00 Medical Care & Emergency Medical Procedures <p>The J.M. Chick Buckbee Juvenile Center policy provides for a juvenile victim who experienced sexual abuse access to forensic medical examinations, at an outside facility, without financial cost. The policy also requires that acute trauma care be provided by the SANE program, including but not limited to, treatment of injuries, HIV/AIDS education, timely access to emergency contraception, STD prophylaxis and testing for sexually transmitted diseases. The facility indicated on the PAQ they have had zero (0) sexual assault victims in the past 12 months requiring a SANE exam.</p>

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. Policy 511.00 Release of Residents 3. Operational Procedures 5.11-00 Release of Residents 4. Policy 413.00 Medical Care & Emergency Medical Procedures 5. Operational Procedures 4.13-00 Medical Care & Emergency Medical Procedures 6. Policy 500.00 Intake and Admissions 7. Operational Procedures 5.00-00 Intake and Admissions <p>The J.M. Chick Buckbee Juvenile Center requires that acute trauma care be provided by the SANE program including but not limited to treatment of injuries, HIV/AIDS education, timely access to emergency contraception, STD Prophylaxis and testing for Sexually Transmitted Diseases. When a possibility of pregnancy exists, the residents receive a pregnancy test.</p> <p>The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all residents who are victims of sexual abuse in any facility. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.</p>

115.386	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. P-01327 Incident Review 3. P-01463 Incident Review 4. P-01339 Incident Review <p>The J.M. Chick Buckbee Juvenile Center shall conduct an incident review at the conclusion of every sexual abuse investigation unless the allegation is determined to be unfounded. The participants of the incident review team will consist of the facility: Managers, supervisors, investigators, and medical or mental health practitioners.</p>

115.387	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. PREA Year in Review Report 3. PREA Review Form 4. Definitions 5. Policy 115.00 Records Management Program 6. PREA Review 7. Sample Resident PREA Review Summary 8. Sample Staff PREA Review Summary <p>The J.M. Chick Buckbee Juvenile Center policy outlines procedures for collecting uniform data on all allegations of sexual abuse and sexual harassment. The PREA Coordinator indicated he would review, collect all data including investigative reports and files, identify trends, implement recommendations and document the reason for not doing so within the facility.</p>

115.388	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Policy 151.00 PREA 2. PREA Year in Review Report <p>The facility collects incident-based data that includes, at a minimum the data necessary to answer questions from the most recent version of the Survey of Sexual Violence, although the facility does not report data directly to BJS. The facility utilizes the Data Review and Corrective Action form to report data and makes the report readily available to the public through its website. The 2017 data report was not listed on the website at the time of the on-site audit.</p>

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. 115.00 - Records Management Program Policy 2. 151.00 - PREA Policy <p>The J.M. Chick Buckbee Juvenile Center policy states; The Department shall ensure that all data collected pursuant to PREA 115.387 are securely retained. The Department shall make all aggregated sexual abuse data from facilities under its direct control, and private facilities with which it contracts, readily available to the public through the Department web site, on an annual basis. The Department shall remove all personal identifiers prior to making aggregated sexual abuse data publicly available. The Department shall maintain sexual abuse data collected pursuant to PREA 115.387 for at least 10 years after the date of its initial collection, unless Federal, State, or local law requires otherwise.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The West Virginia Division of Juvenile Services conducted four (4) PREA audits during the 2017-2018 audit year of the second audit cycle. In review of the agency PREA website the facility posted audit reports indicating the same four facilities completed PREA Audits during the first audit cycle in compliance with the PREA standards. The Auditor was provided with documents through the Online Audit System, additional supporting documents while on-site and full access to interview staff and residents.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency posted the 2015 Final Auditor report on the agency PREA website. The report can be found at the following:</p> <p>https://djs.wv.gov/departments/Pages/WVDJS%20J%20M%20%20Chick%20Buckbee%20Final%20PREA%20Report.pdf</p>

Appendix: Provision Findings

115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.)	yes

115.312 (b)	Contracting with other entities for the confinement of residents	
	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 residents OR the response to 115.312(a)-1 is "NO".)	yes

115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes

	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes

115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.313 (e)	Supervision and monitoring	
	Has the facility 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? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility 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? (N/A for non-secure facilities)	yes

115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes

115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes

115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents 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 a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes

115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

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

115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all	yes

	aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	
	Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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 residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or	yes

	through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	
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115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident’s safety, the performance of first-response duties under §115.364, or the investigation of the resident’s allegations?	yes

115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.317 (b)	Hiring and promotion decisions	
	Does the agency consider 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 residents?	yes

115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes

115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes

115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents 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 residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.317 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.318 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.321 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is not responsible for investigating allegations of sexual abuse.)	yes

115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321 (d) above.)	yes

115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes

115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents 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 residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents 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 residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes

115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents 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 residents)?	yes

115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes

115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes

115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes

115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes

115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes

115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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 115.321(a).)	yes

115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(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 115.321(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 115.321(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 115.321(a).)	yes

115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

115.335 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment?	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?	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 juvenile victims of sexual abuse and sexual harassment?	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?	yes

115.335 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)	yes

115.335 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332?	yes

115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes

115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes

115.341 (e)	Obtaining information from residents	
	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 resident's detriment by staff or other residents?	yes

115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes

115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes

115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes

115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes

115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes

115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes

115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes

115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.352 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents 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 resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (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

115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident 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 resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents 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 residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, 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 resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes

115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident 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 a resident 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 resident 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

115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible 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?	no
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes

115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes

115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes

115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information 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?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents 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 they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes

115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes

115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes

115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident 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
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes

115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	no

115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident 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 a resident 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 a resident 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 a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.364 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.366 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no

115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes

115.367 (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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 resident 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: Resident 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: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes

115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes

115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes

115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes

115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes

115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes

115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes

115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident'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 resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.373 (c)	Reporting to residents	
	Following a resident'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 posted within the resident's unit?	yes
	Following a resident'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 a resident'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 a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, 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 a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes

115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.376 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.376 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes

115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes

115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes

115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes

115.378 (d)	Interventions and disciplinary sanctions for residents	
	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 offer the offending resident participation in such interventions?	yes
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes

115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes

115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes

115.381 (c)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes

115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(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.)	yes

115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes

115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	yes

115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na

115.388 (a) Data review for corrective action		
	Does the agency review data collected and aggregated pursuant to § 115.387 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 § 115.387 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 § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.388 (b) Data review for corrective action		
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.388 (c) Data review for corrective action		
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.388 (d) Data review for corrective action		
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

115.389 (a) Data storage, publication, and destruction		
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes

115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.	yes

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A only if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes