Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails

☐ Interim  ☒ Final

Date of Report  December 30, 2019

Auditor Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ray Reno</td>
<td><a href="mailto:rayreno1@gmail.com">rayreno1@gmail.com</a></td>
</tr>
</tbody>
</table>

**Company Name:** 360 Correctional Consulting LLC

**Mailing Address:** PO Box 31  
**City, State, Zip:** McPherson, KS 67460

**Telephone:** 620-285-1405  
**Date of Facility Visit:** November 12-13, 2019

Agency Information

**Name of Agency:** Cherokee County Sheriff's Office

**Physical Address:** 915 E Country Road  
**City, State, Zip:** Columbus, KS. 66725

**Mailing Address:** PO Box 479  
**City, State, Zip:** Columbus, KS. 66725

**The Agency Is:** ☐ Military  ☐ Private for Profit  ☐ Private not for Profit  ☑ Municipal  ☒ County  ☐ State  ☐ Federal

**Agency Website with PREA Information:** [https://www.cherokeecountykssheriff.com/page.php?id=10](https://www.cherokeecountykssheriff.com/page.php?id=10)

**Agency Chief Executive Officer**

**Name:** Sheriff David M. Groves

**Email:** dgroves@cksoks.org  
**Telephone:** 620-429-3992

Agency-Wide PREA Coordinator

**Name:** There is only one facility, therefore this standard is N/A.

**Email:** N/A  
**Telephone:**

**PREA Coordinator Reports to:**

Click or tap here to enter text.

**Number of Compliance Managers who report to the PREA Coordinator:** N/A
### Facility Information

<table>
<thead>
<tr>
<th>Name of Facility:</th>
<th>Cherokee County Jail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address:</td>
<td>915 E Country Road</td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td>Columbus, KS 66725</td>
</tr>
<tr>
<td>Mailing Address (if different from above):</td>
<td>PO Bx 479</td>
</tr>
<tr>
<td>City, State, Zip:</td>
<td>Columbus, KS 66725</td>
</tr>
<tr>
<td>The Facility Is:</td>
<td>☐ Military ☐ Private for Profit ☐ Private not for Profit ☐ Municipal ☐ County ☐ State ☐ Federal</td>
</tr>
<tr>
<td>Facility Type:</td>
<td>☐ Prison ☒ Jail</td>
</tr>
</tbody>
</table>

**Facility Website with PREA Information:**  [https://www.cherokeecountykssheriff.com/page.php?id=10](https://www.cherokeecountykssheriff.com/page.php?id=10)

**Has the facility been accredited within the past 3 years?** ☒ No

**If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):**

☐ ACA ☐ NCCHC ☐ CALEA ☐ Other (please name or describe: Click or tap here to enter text. ☒ N/A

**If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:**

Click or tap here to enter text.

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### Warden/Jail Administrator/Sheriff/Director

**Name:** Captain Michelle Tippie  
**Email:** mtippie@cksoks.org  
**Telephone:** 620-429-3992

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### Facility PREA Compliance Manager

**Name:** Thomas J. DeGroot  
**Email:** tjdegroot85@gmail.com  
**Telephone:** 620-429-3897

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### Facility Health Service Administrator

**Name:** There is no HSA at this facility.  
**Email:** N/A  
**Telephone:** Click or tap here to enter text.
### Facility Characteristics

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designated Facility Capacity:</td>
<td>106</td>
</tr>
<tr>
<td>Current Population of Facility:</td>
<td>86</td>
</tr>
<tr>
<td>Average daily population for the past 12 months:</td>
<td>74</td>
</tr>
<tr>
<td>Has the facility been over capacity at any point in the past 12 months?</td>
<td>☒ No</td>
</tr>
<tr>
<td>Which population(s) does the facility hold?</td>
<td>☒ Both Females and Males</td>
</tr>
<tr>
<td>Age range of population:</td>
<td>18-70</td>
</tr>
<tr>
<td>Average length of stay or time under supervision:</td>
<td>19 days</td>
</tr>
<tr>
<td>Facility security levels/inmate custody levels:</td>
<td>Minimum, Medium, Maximum, Special Management</td>
</tr>
<tr>
<td>Number of inmates admitted to facility during the past 12 months:</td>
<td>1491</td>
</tr>
<tr>
<td>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:</td>
<td>916</td>
</tr>
<tr>
<td>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:</td>
<td>250</td>
</tr>
<tr>
<td>Does the facility hold youthful inmates?</td>
<td>☒ No</td>
</tr>
<tr>
<td>Number of youthful inmates held in the facility during the past 12 months:</td>
<td>N/A</td>
</tr>
<tr>
<td>Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?</td>
<td>☒ Yes</td>
</tr>
<tr>
<td>Select all other agencies for which the audited facility holds inmates:</td>
<td>☒ Federal Bureau of Prisons, ☒ U.S. Marshals Service, ☒ U.S. Immigration and Customs Enforcement, ☒ Bureau of Indian Affairs, ☒ U.S. Military branch, ☒ State or Territorial correctional agency, ☒ County correctional or detention agency, ☒ Judicial district correctional or detention facility, ☒ City or municipal correctional or detention facility (e.g. police lockup or city jail), ☒ Private corrections or detention provider, ☒ Other - please name or describe:</td>
</tr>
<tr>
<td>Number of staff currently employed by the facility who may have contact with inmates:</td>
<td>61</td>
</tr>
<tr>
<td>Description</td>
<td>Value</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Number of staff hired by the facility during the past 12 months who may have contact with inmates:</td>
<td>6</td>
</tr>
<tr>
<td>Number of contracts in the past 12 months for services with contractors who may have contact with inmates:</td>
<td>4</td>
</tr>
<tr>
<td>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</td>
<td>5</td>
</tr>
<tr>
<td>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</td>
<td>8</td>
</tr>
</tbody>
</table>

**Physical Plant**

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of buildings:</td>
<td>1</td>
</tr>
<tr>
<td>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</td>
<td></td>
</tr>
<tr>
<td>Number of inmate housing units:</td>
<td>8</td>
</tr>
<tr>
<td>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a “housing unit” defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</td>
<td></td>
</tr>
<tr>
<td>Number of single cell housing units:</td>
<td>5</td>
</tr>
<tr>
<td>Number of multiple occupancy cell housing units:</td>
<td>3</td>
</tr>
<tr>
<td>Number of open bay/dorm housing units:</td>
<td>3</td>
</tr>
<tr>
<td>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</td>
<td>3</td>
</tr>
<tr>
<td>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</td>
<td>Yes</td>
</tr>
<tr>
<td>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</td>
<td>Yes</td>
</tr>
</tbody>
</table>
### Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

### Medical and Mental Health Services and Forensic Medical Exams

#### Are medical services provided on-site?

- Yes ☒
- No ☐

#### Are mental health services provided on-site?

- Yes ☒
- No ☐

#### Where are sexual assault forensic medical exams provided? Select all that apply.

- On-site ☐
- Local hospital/clinic ☒
- Rape Crisis Center ☐
- Other (please name or describe: Click or tap here to enter text.)

### Investigations

#### Criminal Investigations

**Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:**

1

When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.

- Facility investigators ☒
- Agency investigators ☒
- An external investigative entity ☐

Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)

- Local police department ☐
- Local sheriff's department ☐
- State police ☐
- A U.S. Department of Justice component ☐
- Other (please name or describe: Click or tap here to enter text.) ☐
- N/A ☒

#### Administrative Investigations

**Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment:**

2

When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply

- Facility investigators ☒
- Agency investigators ☒
- An external investigative entity ☐

Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)

- Local police department ☐
- Local sheriff's department ☐
- State police ☐
- A U.S. Department of Justice component ☐
- Other (please name or describe: Click or tap here to enter text.) ☐
- N/A ☒
Audit Findings

Audit Narrative

Six weeks prior to the on-site audit date, the auditor sent PREA audit notices, in both English and Spanish, to the facility PREA Coordinator (PC), along with instructions for posting them. The auditor requested that the notices be posted in each youth living unit, classroom, program area, the employee bulletin boards, and in the public lobby areas. Documentation was received that the notices had been placed, as requested. The auditor received correspondence from one inmate in the jail and no staff in the facility. The inmate who corresponded was still housed in the jail during at the time of the on-site portion of the audit and was interviewed by the auditor.

Three weeks out from the on-site date, the auditor received a thumb drive containing the Pre-Audit Questionnaire and supporting documents for each standard. The auditor was in contact with the facility PC, both by phone and email, to discuss the documentation and clarify questions.

Three days prior to the on-site visit, the auditor emailed a tentative audit agenda outlining the auditor’s planned schedule while at the facility.

On the morning of the first day at the Cherokee County Jail, the auditor met with several members of the facility leadership to discuss the audit process and to answer questions. At this time, the auditor asked for and received several additional items of documentation including:

- Alpha roster by cell house.
- List of names of inmates who have reported being sexually abused during their initial risk screening.
- List of inmates who are LGBTQI.
- List of inmates with mental health issues.
- List of inmates who do not speak English.
- List of inmates in segregation.
- List of inmates who have reported a sex abuse or sexual harassment in the facility.
- List of inmates who are blind, deaf, or hard of hearing.
- List of correctional staff who were hired having previous correctional/institutional experience.
- Duty rosters for Tuesday and Wednesday.
- List of correctional staff hired or promoted during the past 12 months.

After the in-briefing, the auditor was led on a full tour of the facility, accompanied by the PC. The tour included all living units, book-in area, medical unit, dispatch area, visiting room, food service area, recreation room, library, program and education areas, bathrooms, and showers. During the tour, the auditor noted that the facility had done a great job with the placement of the security cameras, although there are a number of blind spots. These areas are known to facility administration and there is a plan to increase the number and quality of cameras in the future that will eliminate many of the blind spots. While on the tour, the auditor informally interviewed both staff and inmates met along the way about their general PREA knowledge and training. The auditor also successfully used one of the telephones available to the inmates to call the PREA reporting hotline. At the end of the tour, the auditor began formal staff interviews. The auditor was provided a private area in which to conduct the interviews, and staff were brought to this office.

A total 23 staff interviews were conducted (14 Targeted), plus two volunteers and two community service providers. In addition, 15 inmates were interviewed (5 Targeted).
Facility Characteristics

The Cherokee County Jail is a single story facility, built in 2006, which is part of the Cherokee County Sheriff’s Department. Their jail consists of seven housing units and a 12-bed Trustee Pod, for a total capacity of 106.

- A-Pod (minimum custody) contains seven two-man cells and one handicap accessible cell.
- B-Pod (medium/maximum custody) contains eight two-man cells.
- C-Pod (maximum custody) contains eight two-man cells.
- D-Pod (sex offenders) seven two-man cells and one handicap cell.
- E-Pod (administrative segregation and overflow) contains four two-man cells.
- Two Female Dorms contain 18 bunk beds.

In addition, there are two holding cells and three segregation cells in the Book-in/Intake area and two medical segregation cells in the Clinic area.

The following are auditor observations noted during the facility tour:

- PREA signage and posters were hung on the walls throughout the facility.
- PREA posters contained telephone hotline numbers for inmates to make a PREA allegation.
- Camera placement (90 cameras total) was well thought out, although additional cameras are needed to reduce blind-spots.
- Corrections officers all wear body cameras at all times.
- There is a significant blind spot in the laundry room (need to install cameras or mirrors). This was an issue at the last audit and continues to be a risk area for staff and inmates.
- There is a blind spot in the clothing room.
- Cameras are well placed in the stairwells leading into the basement.
- The windows in some of the cellhouses are coated with a reflective film that reduces staff’s ability to view the activity inside.
- There are blinds on the windows of the E-Pod and the sex offender unit which prevents staff from being able to see into the unit from the hallway.
- There is good PREA information posted on living unit bulletin boards.
- All areas of the jail were clean and well lighted.
### Summary of Audit Findings

#### Standards Exceeded
- Number of Standards Exceeded: 6
- List of Standards Exceeded: 115.15  115.17  115.32  115.33  115.35  115.81

#### Standards Met
- Number of Standards Met: 39

#### Standards Not Met
- Number of Standards Not Met: 0
- List of Standards Not Met: Click or tap here to enter text.
PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- 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 ☐ No

115.11 (c)

- 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 ☐ No ☒ NA
- 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 ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility does have a written PREA policy, referenced as policy CKJ 315, which states that the Cherokee county jail has a zero tolerance for sexual abuse and sexual harassment within the jail. The
The PREA Coordinator reports directly to the Jail Administrator. Through discussions with the PREA Coordinator and the Sheriff, it was determined that the PREA Coordinator does have the authority and influence required to create and implement policies, procedures, and practices related to PREA implementation and service. Through discussions with the PREA Coordinator (PC), it was determined that there has been specific time allotted for the service of PREA, separate from the regular duties assigned, and that the time allotted overall is sufficient. The information below is from policy CKJ 215 titled, PREA Coordinator, which lists a partial list of the PC’s duties and reads in part, as follows:

1. Coordinate between the facility, law enforcement, local advocates, Personnel Victims Services, and the County Attorneys throughout the investigative process as necessary following incident response protocol
2. Collaborate with and supervise information distribution to and from the facility, law enforcement, and the County Attorney’s office regarding ongoing criminal allegations.
3. Coordinate with the Administrator and Sheriff to ensure that annual audits include inspections of areas and situations where sexual abuse may be likely to occur, and recommend mitigation for those areas and situation
4. Collect and compile data of PREA incidents to be distributed quarterly to the Administrator and Sheriff.
5. Produce an annual summary for the Administrator on the frequency and severity of PREA incidents within the facility including trends during the year and comparisons to previous years.
6. Facilitate an annual “lessons learned” staff training or in-service to examine all documentation associated with sexual abuse within the facility
7. Develop training standards in response to policy/directive concerning PREA incidents
8. Coordinate with the Administrator in the development and implementation of lesson plans for new employee orientation and staff in-service training
9. Coordinate with facility staff to compile information collection directly from the inmate population by means of various survey methods, which relate to the prevalence of sexual abuse and/or sexual activity within the facility, in order to provide insight into potential strategies for its reduction or elimination.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity’s obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  ☐ Yes  ☐ No  ☒ NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards?
Facility Name – double click to change

☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

This standard is N/A.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated)? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? Yes ☒ No ☐

In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? Yes ☒ No ☐

In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? Yes ☒ No ☐ NA ☒

In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes ☒ No ☐

In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? Yes ☒ No ☐

In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes ☒ No ☐

115.13 (b)

In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) Yes ☒ No ☐ NA ☒

115.13 (c)

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 ☒ No ☐

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 ☒ No ☐

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 ☒ No ☐

115.13 (d)

Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes ☒ No ☐

Is this policy and practice implemented for night shifts as well as day shifts? Yes ☒ No ☐
Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? ☐ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

There is a written staffing plan which calls for a minimum of three officers to be on duty at all times across all shifts. The plan requires there to be at least one female officer on duty for each shift. The plan also includes the use of fixed surveillance cameras that are live fed into the control room. Officers on duty also each wear a body camera. Once per year, the staffing plan is reviewed using a template that mirrors the requirements (a.1-11) of this standard. The staff involved in the plan review includes the Sheriff, PC, Jail Administrator, Undersheriff, and Chief Detective, each of whom sign the review acknowledgment form. The annual staffing review document was provided to the auditor as documentation. It was noted that during the current period of review, there were no deviations from the staffing plan. This is accomplished through the use of staff overtime, and the willingness for staff to stay over on shift when asked. Additionally, there are other staff who can help to fill in on shift if needed, including the PC, Jail Administrator, and other administrative or road patrol staff. At the time of the on-site visit, there were three corrections officer vacancies.

Per policy CKJ 402, titled, Security Inspections, the Jail Administrator and an alternating security supervisor will complete random, unannounced rounds throughout the facility. The auditor interviewed several senior administrative staff, including the Jail Administrator, and was told that regular unannounced rounds are made through the jail for the purposes outlined in this standard. Documentation was provided to show that unannounced rounds are made by staff on shift; however, nothing was provided to show that higher level staff made unannounced rounds. Through staff and inmate interviews, the auditor is satisfied that the rounds are completed; however, it is recommended for the future, that the rounds be documented to show a distinction from regular security staff rounds.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

☐ Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (b)
In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ☒ NA

In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ☒ NA

115.14 (c)

Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ☒ NA

Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ☒ NA

Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ☒ NA

Auditor Overall Compliance Determination

□ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility does not house inmates who are less than 18 years old.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

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 □ No

115.15 (b)
▪ Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA

▪ Does the facility always refrain from restricting female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA

115.15 (c)

▪ Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No

▪ Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA

115.15 (d)

▪ Does the facility have policies that enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No

▪ Does the facility have procedures that enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No

▪ Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

▪ Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate’s genital status? ☒ Yes ☐ No

▪ If an inmate’s genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No

115.15 (f)

▪ 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 ☐ No
Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes  ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard *(Substantially exceeds requirement of standards)*

☐ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

Per policy CKJ 405 titled, Searches, cross gender pat-down and strip searches are not allowed except in emergency circumstances. Male staff pat-down male inmates and female staff pat-down female inmates, thereby exceeding the requirements of this standard. The same policy requires that if such a condition arises, that it be documented on an incident report. Through interviews with security staff and inmates, it was determined that this policy is strictly followed. There were no instances of cross gender searches to review during this period of review. Staff who were interviewed were well aware of the policy that prohibits strip searching any inmate solely for the purpose of determining the inmate’s sex. There have been no transgender inmates booked into the jail during the current period of review. Staff were able to explain that, if a transgender inmate were to be booked in, they would use a combination of file review, interviews, consultation with medical and mental health providers, and computer records, as well as the inmates’ own perception of their safety to make housing and program decisions.

According to the staff and female inmates who were interviewed, there was never a time when a female inmate missed any kind of call-out because there was no female staff on duty to perform a search.

All of the staff who were interviewed reported that they have received training on how to conduct cross gender and transgender pat down searches. In addition, the auditor reviewed the training materials used for the facility’s PREA training, which included the instruction for cross gender pat down search. Documentation (staff sign-in sheets) was reviewed that showed security staff had attended the training class.

All of the inmates who were interviewed reported that they were able to shower, use the bathroom, and change clothes without staff of the opposite gender viewing them. The auditor spent time in the security control room where the live security cameras are fed and was able to verify that inmates cannot be viewed using the rest room or showering from the control room. There is one toilet located in the recreation room that is in clear view from the control center; however, the facility has created a digital blackout over the toilet through the cameras that prevents viewing an inmate who is using it.

The inmates who were interviewed overwhelmingly reported that staff do announce themselves when entering an opposite gender living unit. Only one inmate, a male, reported that female staff do not announce when entering.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient
115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if “other,” please explain in overall determination notes)? ☒ Yes ☐ No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- 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 ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes ☐ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under §115.64, or the investigation of the inmate’s allegations? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

At the time of the onsite visit, there were no inmates who were blind, deaf or hard of hearing, or who did not speak English. There are many signs about PREA posted throughout the jail written in both English and Spanish, and the PREA orientation materials are all available in Spanish. There were no inmates identified who were known to have a significant mental health issue which would keep them from understanding information provided about PREA. According to staff who were interviewed, the most common non-English language spoken in the area is Spanish. There are a number of staff who speak Spanish and could be used to translate, if needed. The facility also has made arrangements with a professional interpretive service that will translate almost any language over the telephone. This service can also provide translation for any written documents. If needed, the service can provide the entire written PREA orientation documents in almost any language. According to the PC, if an inmate were to be booked in who could not read, or was blind, staff would read the PREA materials to them and ensure that they understood the facility’s zero tolerance for sexual abuse and sexual harassment and how to make a report of it, if needed. If an inmate who is deaf were to be booked into the facility, the PREA orientation is provided on the television with closed captions. The PC would make sure that an inmate who might be low functioning intellectually has a good understanding of PREA before making a housing assignment.
### Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

#### 115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? ☒ Yes ☐ No

- Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

#### 115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? ☒ Yes ☐ No

- Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? ☒ Yes ☐ No
115.17 (d)

▪ Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

115.17 (e)

▪ Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? ☒ Yes ☐ No

115.17 (f)

▪ Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No

▪ Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ☒ Yes ☐ No

▪ Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

▪ Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

▪ 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative

Per policy CKJ 202, Selection and Placement of Personnel, the agency will not hire or promote anyone who will have inmate contact, with a history of sex abuse or other illegal sexual activity. Per the policy, each applicant will have a background check completed before they are hired. The background check includes a criminal history check through the National Crime Information Center (NCIC) and a check through the Interstate Identification Index (III). The Jail Administrator explained the selection process has several steps each applicant must pass including, NCIC, III, and reference checks, a fingerprint check, an interview with the Jail Administrator, a medical physical check, a psychological test, and a drug screen. Each applicant is asked directly about previous sexual misconduct during the interview phase. The Jail Administrator reported that there is no formal classroom training provided for newly hired officers, but that they are assigned with another officer to complete on-the-job training (OJT). It was reported that if an applicant has previous institutional (correctional) work history, the Jail Administrator sends a letter to the agency requesting to know if the applicant had ever been the subject of a substantiated case of sex abuse or if they has resigned during an investigation of sex abuse or sexual harassment. The auditor requested and received a list of employees hired in the past year who would have inmate contact, and who had a history of prior institutional employment. There were very few employees who met these criteria; however, the auditor selected and reviewed personnel files from the names provided and found documentation to show that an effort was made to obtain the required information prior to hiring the employee. There was no documentation to show that the previous employer responded to the request for information. Although the Jail Administrator could not remember having ever receiving a request for information about a previous Cherokee county jail employee, she reported that if she were to receive such a request, she would respond, giving the information required by this standard.

Similarly, it was reported that contract staff who will have inmate contact are also asked directly about previous sex abuse or sexual misconduct prior to being allowed inmate contact. Contract staff, and other temporary contractors are checked for criminal history through NCIC and III prior to engagement.

Because the facility asks previous institutional employers about instances of sexual harassment as well as cases of sex abuse, this standard is marked as exceeds standard.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
  - ☐ Yes
  - ☐ No
  - ☒ NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the
agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
☐ Yes  ☐ No  ☒ NA

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

This standard is N/A.

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**RESPONSIVE PLANNING**

**Standard 115.21: Evidence protocol and forensic medical examinations**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.21 (a)**

- 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  ☐ No  ☐ NA

**115.21 (b)**

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
  ☒ Yes  ☐ No  ☐ NA

- 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  ☐ No  ☐ NA
115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? ☒ Yes ☐ No

- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No

- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? ☒ Yes ☐ No

- Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No

- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.) ☒ Yes ☐ No ☐ NA

- Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

115.21 (e)

- 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 ☐ No

- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☐ Yes ☐ No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☐ Yes ☐ No ☒ NA

115.21 (g)

- Auditor is not required to audit this provision.
If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) ☒ Yes ☐ No ☐ NA

**Auditor Overall Compliance Determination**

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

**Instructions for Overall Compliance Determination Narrative**

There is a uniform evidence protocol in place at the Cherokee county jail. Although there were no incidents during this period of review which would have called for an inmate to undergo a forensic medical examination, there is a protocol in place, should there be a need in the future. There are no bona fide rape crisis centers in the area. However, there is a signed MOU with the Via Christi Hospital in Pittsburg, KS to provide forensic examinations, if needed. Any services provided to the inmate victim would be provided at no cost to the inmate. There are Sexual Assault Nurse Examiners (SANE) available at Via Christi who would provide the necessary treatment and evidence collection for the inmate victim of rape or sexual assault.

The Sheriff’s office has also entered into other MOUs with the Safehouse Crisis Center in Pittsburg, KS and the Spring River Mental Health and Wellness Center in Riverton, KS. Both facilities can provide a victim advocate or mental health follow-up services in the event that an inmate victim of rape or sexual assault were to request their service. Again, all services would be provided at no cost to the inmate victim. The auditor contacted the executive director of the Safehouse Crisis Center. The director advised, while no requests for service had been received from the Cherokee County Jail during the period currently under review, that they would respond to a request for a victim advocate if asked. She went on to say that the advocate would provide services during the medical examination and throughout any investigatory interviews, if allowed.

**Standard 115.22: Policies to ensure referrals of allegations for investigations**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No
115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No

- Does the agency document all such referrals? ☒ Yes ☐ No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a.)) ☐ Yes ☐ No ☒ NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The facility has a PREA policy, CKJ 315, which states that all allegations of sex abuse and sexual harassment will be investigated. The agency is a qualified and professional law enforcement agency which conducts its own criminal and administrative PREA allegations. The PREA policy is published on the facility website and is available to the public for viewing.

Every staff member who was interviewed, regardless of rank or position, clearly communicated that if an allegation were made, an investigation would follow.

Inmates who were interviewed reported that they were confident that if they were to make an allegation of sex abuse or sexual harassment, it would be taken seriously and investigated.
TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on inmates’ right to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? ☒ Yes ☐ No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee’s facility? ☒ Yes ☐ No

- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? ☒ Yes ☐ No
115.31 (c)

- Have all current employees who may have contact with inmates received such training? ☒ Yes ☐ No
- 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 ☐ No
- 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 ☐ No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

PREA Training is given to all staff and contractors who will have unsupervised contact with any inmate at the jail. The auditor reviewed the training material used for the PREA training, as well as the facility training records and sign-in sheets. A list of current staff was provided to the auditor on the morning of the first day of the on-site portion of the audit. The auditor randomly selected several names from the list and was subsequently able to match their names with the PREA training records. The facility PC gives the training to each staff member, both individually and in some group settings. PREA update training is provided to the staff annually. Additionally, the majority of the corrections officers have completed the online training course titled, PREA; Your Role in Responding to Sexual Abuse, which is offered through the National Institute of Corrections, (NIC). Each of the staff who were interviewed reported that they had received their initial PREA training almost immediately upon being hired. The staff who were interviewed who had been employed for longer than one year had had additional refresher training on PREA, most recently in October of 2019. Because the facility houses both male and female offenders, the PREA training is tailored for dealing with both sexes. Staff who were interviewed were knowledgeable about PREA and knew what their responsibilities were in responding to an allegation of sex abuse and sexual harassment. It should be noted once again that the Cherokee county jail is a very small facility with a small population. There have been no significant PREA cases reported during the current period of review; therefore, staff do not get a lot of experience in responding to PREA allegations. The PREA training material contains all of the information required by this standard, plus additional information that is specifically for this facility. The information below is taken from policy CKJ 208.1 titled, PREA Training. It reads in part, as follows.
Cherokee County Sheriff’s Office Staff who may have contact with inmates will receive training related to the prevention, detection, response, and investigation of sexual misconduct. This training shall include, but not be limited to, the following:

- The department’s policies that address zero tolerance for sexual abuse and sexual harassment;
- How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- The Inmate’s right to be free from sexual abuse and harassment;
- The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- The dynamics of sexual abuse and sexual harassment in confinement;
- The common reactions of sexual abuse and sexual harassment victims;
- How to detect and respond to signs of threatened and actual sexual abuse;
- How to avoid inappropriate relations with inmates;
- Effective and professional communication with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The Cherokee County Sheriff’s Office shall take appropriate steps to ensure that inmates with disabilities (including for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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 (115.16(a)). These steps include:

- When necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially.
- Ensure that written materials are provided in formats or through methods that ensure effective communications with inmates with disabilities, limited reading skills, or who are blind or have low vision.

The Cherokee County Jail shall provide Inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

- The Jail shall prohibit use of inmate interpreters, inmate readers, or other assistant except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-responders duties under 115.64 or the investigation of the inmate’s allegations.
- Staff will complete an Incident Report documenting the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.
- A copy of the Incident Report will be turned into the PREA Coordinator.

**Standard 115.32: Volunteer and contractor training**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)
- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures? ☒ Yes ☐ No

**115.32 (b)**

- Have all volunteers and contractors who have contact with inmates been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

**115.32 (c)**

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

- ☒ Exceeds Standard *(Substantially exceeds requirement of standards)*
- ☐ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
- ☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

All temporary contractors and volunteers are required to receive PREA training prior to having contact with inmates. The auditor reviewed the written training outline that is used to provide volunteer/contractor PREA training. The auditor was provided a list of names and phone numbers of people who are current volunteers. From that list, names were randomly selected for interview over the telephone. The volunteers who were interviewed were very cooperative and reported that they had received PREA training prior to being allowed to interact with the inmates. Some volunteers reported that they have received the PREA training several times because they often sit in while training is provided to the new volunteers that she brings to the facility. Each reported that they are given the training direct from the PREA Coordinator. Each reported that they were fully aware of the facility’s zero tolerance policy, and, if they were to ever become aware of any allegations of sex abuse or sexual harassment, to whom they are to make a report. One volunteer stated that she has been coming to the facility for over five years and has never had any inmate make an allegation of any kind of inappropriate sexual behavior. She went on to say that because she provides religious education, the inmates are very open with her and she felt that if any sex abuse or sexual harassment were going on in the facility, one of the inmates whom she works with would have told her about it.

**Standard 115.33: Inmate education**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes  ☐ No

- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes  ☐ No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes  ☐ No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? ☒ Yes  ☐ No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? ☒ Yes  ☐ No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)? ☒ Yes  ☐ No

- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? ☒ Yes  ☐ No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes  ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes  ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes  ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes  ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes  ☐ No

115.33 (e)
Does the agency maintain documentation of inmate participation in these education sessions?
☒ Yes ☐ No

115.33 (f)

In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?
☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Every inmate booked into the jail is given PREA information at the time of booking. This information is given to the inmate both verbally by the book-in officer and through a written document that the inmate is allowed to keep. The auditor reviewed the information provided in the PREA pamphlet that is given to the inmate. The pamphlet contains an explanation of the facility’s zero tolerance policy toward sex abuse and sexual harassment, several different ways they can report abuse/harassment, and instructions on what to do if they were to become the victim of sex abuse. The information contained below is an excerpt from the inmate handbook, which is provided to each inmate through the inmate kiosk under the PREA heading.

**PRISON RAPE ELIMINATION ACT (PREA)**

1) The Cherokee County Sheriff’s Office does not condone or tolerate any type of sexual misconduct, sexual assault, consensual sexual contact, sexual abuse, rape, and/or sexual harassment toward any inmate(s).
2) Inmates whether victim, perpetrator, witness, or reporter has the right:
   a) To serve their incarceration free of sexual abuse.
   b) To be free from retaliation, beginning when the allegation is made until the threat has passed as determined through the investigation process.
3) The Sheriff’s Office will aggressively pursue any complaints, suspicions, or criminal acts of sexual misconduct up to and including prosecution under Kansas Law.
4) Inmates may confidentially disclose incidents of sexual misconduct, sexual assault, sexual contact, sexual abuse, rape, and/or sexual harassment to Sheriff’s Office staff either verbally or in writing.
5) Incidents can be reported directly using an Inmate Request Form to the PREA Coordinator. An Inmate may request an envelope to submit these forms confidentially.
   a) Inmate must request an envelope for a Confidential Request
   b) A Jail Officer will issue an envelope to the Inmate.
   c) The Jail Officer will allow the inmate to seal the request in the envelope.
   d) The Jail Officer will deliver the sealed request to the PREA Coordinator.
6) Inmates may report incidents through the Cherokee County Dispatch Center using the Inmate Phone System. Inmate may call (888) 299-0911.
7) Inmates may also report PREA incidents by using the toll-free CRIME STOPPERS number: 1 (800) KS CRIME.
8) Inmates detained solely for civil immigration purposes may contact The Department of Homeland Security at 1 (866) 346-2423 to report PREA incidents.

The auditor reviewed the intake material from several randomly selected inmates and found that each was given PREA information during the book-in process. Each inmate who was interviewed reported receiving the PREA information shortly after being booked in.

Comprehensive education is provided through the PREA video titled, PREA: What You Need to Know, and one-on-one discussion with the PC. The video discusses the inmates’ right to be free from sex abuse and sexual harassment and from retaliation if they were to report a PREA violation or cooperate with an investigation. The PREA video is shown on the facility television system at least once per month, usually during the lunch period.

PREA education is available in both English and Spanish. If another language is needed, the PREA material can be translated or transcribed using the facility’s contracted translation service. There has not been a need to engage any translation services during the period currently under review.

If the facility were to receive an inmate who is blind or has low vision, the PC would personally read the PREA orientation material to them to ensure comprehension of the zero-tolerance policy and how to make a PREA allegation. An inmate who is deaf would still be able to view the PREA video by use of closed captioning. If needed, they would receive direct one-on-one attention from the PC to ensure PREA comprehension.

Each inmate who was interviewed was able to name several ways that they could make an allegation of sex abuse or sexual harassment. The most common responses were that they would tell a staff member, use the telephone hotline, write a letter using the inmate kiosk, or file a grievance.

In addition, there are several posters hung throughout the facility which contain information about PREA and how to make a PREA report. The inmates who were interviewed reported that they receive PREA information regularly, and that they have regular interaction with the PC.

**Standard 115.34: Specialized training: Investigations**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.34 (a)**

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

**115.34 (b)**

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA
Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.)) ☒ Yes ☐ No ☐ NA

Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.)) ☒ Yes ☐ No ☐ NA

115.34 (c)

Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a.)) ☒ Yes ☐ No ☐ NA

115.34 (d)

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility employs one full-time investigator, who is also a sworn law enforcement officer by the state of Kansas and has completed basic training from the Kansas Law Enforcement Training Center. Additionally, he has completed the online specialized training from the National Institute of Corrections (NIC) on investigating sex abuse in a confinement setting, in addition to the annual PREA refresher training provided by the facility. He is an experienced, full-time investigator who has completed many criminal investigations for the department. Investigation files are organized and complete, and once the case is closed, files are stored electronically. He has also completed the online NIC course titled, “Medical Health Care for Sexual Assault Victims in a Confinement Setting,” “Behavioral Health Care for Sexual Assault Victims in a Confinement Setting,” and “Communicating Effectively and Professionally with LGBTI Offenders.” The training provided includes the use of Miranda and Garrity warnings.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.) ☒ Yes ☐ No ☐ NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) ☒ Yes ☐ No ☐ NA

- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) ☐ Yes ☐ No ☒ NA
Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility has one part-time medical/mental health worker who works one day per week in the facility. During the interview with her, it was obvious that she is very dedicated to working in the facility and that she cares very much about providing medical services and mental health services when needed. Although the facility does not provide any kind of forensic examination of an inmate victim of sex abuse, she is a Masters-level APRN with 40 hours of specialized training as a SART/SANE examiner for adult or adolescent clients. She relayed that she lives close by and is more than willing to respond to the facility if called. She would rather do that than tell the staff to transport someone to the emergency room for minor medical issues. Although she has not been called upon to provide this type of service in the past year, she is willing and able to do so when called upon. Additionally, she attended Jail Medical training sponsored by the Kansas Sheriff's Association and is certified as a Family Medical Practitioner. Her training has covered the topics of “How to Detect and Assess Signs of Sexual Abuse and Sexual Harassment,” “Preserving Physical Evidence of Sex Abuse,” and “Responding Effectively to Sex Abuse and Sexual Harassment.” She has also completed the PREA refresher training provided in October 2019. She is scheduled to complete the online NIC course titled, “Medical Health Care for Sexual Assault Victims in a Confinement Setting,” “Behavioral Health Care for Sexual Assault Victims in a Confinement Setting,” and “Communicating Effectively and Professionally with LGBTI Offenders.”

Policy CKJ 208.1 PREA Training reads in part, as follows:

All full and part time medical and mental health staff shall receive specialized training as well as the training mandated for employees or contractors, depending upon the status of the practitioner at the agency. The agency shall maintain documentation that medical and mental health practitioners have received such training. Specialized training shall include, but not be limited to;

Detecting and assessing signs of sexual abuse, assault, and harassment;
Preserving physical evidence of sexual abuse and assault;
Responding effectively and professionally to victims of sexual abuse, assault, and harassment;
How and to whom report to allegations or suspicions of sexual abuse and harassment.

a) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility? ☒ Yes ☐ No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument? ☒ Yes ☐ No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? ☐ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate’s criminal history is exclusively nonviolent? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective
determination based on the screener’s perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate’s own perception of vulnerability? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? ☒ Yes ☐ No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse? ☒ Yes ☐ No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses? ☒ Yes ☐ No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, history of prior institutional violence or sexual abuse? ☒ Yes ☐ No

115.41 (f)

- Within a set time period not more than 30 days from the inmate’s arrival at the facility, does the facility reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? ☒ Yes ☐ No

115.41 (g)

- Does the facility reassess an inmate’s risk level when warranted due to a referral? ☒ Yes ☐ No

- Does the facility reassess an inmate’s risk level when warranted due to a request? ☒ Yes ☐ No

- Does the facility reassess an inmate’s risk level when warranted due to an incident of sexual abuse? ☒ Yes ☐ No

- Does the facility reassess an inmate’s risk level when warranted due to receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness? ☒ Yes ☐ No

115.41 (h)
Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? ☒ Yes ☐ No

115.41 (i)

Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

All inmates who are booked into the jail are given information about PREA and are screened for risk of sexual abusiveness and sexual victimization using an objective screening questionnaire. The assessment is done as part of the booking process by the booking officer. Because any security staff member may be the booking officer, all officers have been trained by the PC on how to complete the assessment. The assessment is completed again at the 30-day mark by the PC. Additional screening is completed if there is a reason to do so. Inmates are not disciplined for refusing to answer the questions, but it could mean placement temporarily in a more restrictive setting until an assessment can be made. Staff who were interviewed understood the reason for the risk assessment and also were aware of the need to restrict the dissemination of the information to only those with a legitimate need to know.

The risk assessment asks the offender for their birth gender, as well as their gender expression and sexual orientation. Inmates who were interviewed related that they were asked these questions and the purpose behind them. The risk assessment includes asking for the information as follows:

1. What is your gender?
2. What was your sex at birth?
3. What is your gender expression?
4. What is your sexual orientation?
5. Who are you attracted to?

PREA Orientation

1. The Cherokee County Sheriff’s Office does not condone or tolerate any type of sexual misconduct, sexual assault, consensual sexual contact, sexual abuse, rape and/or sexual harassment toward any inmate(s).
2. Inmates have the right to serve their incarceration free of sexual abuse.
3. Sexual assault can happen to males and females.
4. Sexual abuse can occur physically or verbally.
5. Physical sexual abuse occurs when a person physically touches or tries to touch another person’s private parts; either on top or under the clothes.
6. Verbal sexual abuse occurs when a person verbally threatens to touch the private parts of another person.
7. Private parts include the: penis, vagina, inner thigh, buttocks, or breast.
8. All persons are expected to immediately report any sexual assault, even if the assault happens to another person.
9. Sexual assault can be reported to any staff member or someone you trust.
10. Incidents can be reported directly by submitting a PREA Request to the PREA Coordinator. An Inmate can request an envelope to submit these forms in writing through a sealed envelope.
11. The Sheriff’s Office will aggressively pursue any complaints, suspicions, or criminal acts of sexual misconduct up to including prosecution under Kansas Law.
12. Anyone who sexually assaults another person will face criminal charges.
13. Retaliation against a victim or the person who reported the sexual assault will not be tolerated.
14. All Victims and informants will be protected.
15. Reporting a sexual assault / sexual harassment is a serious allegation.
16. Inmates will be held accountable through all means available who allege sexual abuse, and whose allegations are proven by investigators to be false.

Inmate Name: ____________________ Inmate Number: _____________ Personal History Orientation
1. Have you ever been incarcerated in a City, County, State, Federal or any other Facility?
Comment:
2. Have you had prior convictions for sex offenses against an adult or child?
Comment:
3. Have you ever been convicted of violent offenses?
Comment:
4. List prior charges, convictions, and dates. (if answer to question 2 is Yes or verified through background check)
Comment:
5. Have you ever been Sexually Assaulted?
Comment:
6. Did the Assault occur in Jail or Prison? (If answer to Question 4 is Yes)
Comment:
7. How Long ago did the assault occur?
Comment:
8. Do you have a mental, physical, or developmental disability?
Comment:
9. Is there any reason you feel you could become a victim of sexual abuse / sexual assault or sexual harassment while being held in this facility?
Comment:

Interviewing Officer Observation / Questions

a. Is this Inmate being detained solely for civil immigration purposes?
b. By checking Cherokee County Sheriff’s Office database, does inmate have prior Disciplinary actions within our facility for violent acts or sexual abuse
c. Does the physical build; age, and/or appearance of this inmate need to be taken into consideration for housing assignment?
d. Does the person’s gender expression match the cultural and societal expectations for that gender in their general community?
In addition to the risk assessment, book-in officers will check to see if the inmate has been booked into the jail before, and complete a wants and warrants check through NCIC.

The auditor randomly selected the names of several inmates currently housed in the jail who were booked in during the past year and found that each was given the risk assessment at the time of book-in.

### Standard 115.42: Use of screening information

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? ☒ Yes ☐ No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? ☒ Yes ☐ No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No
When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems? ☒ Yes ☐ No

115.42 (d)

Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? ☒ Yes ☐ No

115.42 (e)

Are each transgender or intersex inmate’s own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No

115.42 (f)

Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☐ Yes ☐ No

115.42 (g)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgment.) ☒ Yes ☐ No ☐ NA

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgment.) ☒ Yes ☐ No ☐ NA

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgment.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The facility PREA policy states in part, as follows:

1. The Cherokee County Sheriff’s Office will respond to, investigate, and support the prosecution of sexual abuse and sexual harassment within the Cherokee County Jail. Through continual education of staff and inmates, the Sheriff’s Office will increase awareness of safe reporting mechanisms and available services to victims, thereby creating an institutional culture that discourages sexual abuse and sexual harassment. Through classification and housing assignment, the Cherokee County Jail will identify opportunities to separate and carefully monitor sexually predatory inmates and vulnerable inmates to reduce the incidence of sexual abuse and sexual harassment. The Cherokee County Jail will utilize data collection systems to accurately track sexual abuse and sexualized behavior; facilitate identification of the causal factors; and annually incorporate “lessons learned” into improved operations, services and training toward a zero-tolerance standard.

The auditor interviewed several officers who regularly work as booking officer and learned that decisions about initial housing are made by the booking officer in conjunction with the shift supervisor, using the information obtained from the screening to keep separate the potential victims from the potential abusers. Information is entered into the jail software system which automatically flags certain information. The PC explained that determinations regarding where to house or work a transgender or intersex inmate would be made on a case-by-case basis using a team approach involving the medical staff and taking into account the inmate’s own perception. The jobs available to working inmates are confined to work in the same unit where they live, so there is not an opportunity to be outside of direct staff supervision. Inmates who are involved in any program provided by the facility are always directly supervised by staff. Transgender or intersex inmates would be allowed to shower alone if it were requested by the inmate, or if staff believed it were needed for safety reasons. According to the PC, transgender and intersex inmates would have additional risk assessments completed at least twice per year. There are no dedicated units for housing gay, bisexual, transgender, or intersex inmates.

At the time of the on-site visit, there were no transgender or intersex inmates housed in the facility, and none have been booked in during the current period of review.

**Standard 115.43: Protective Custody**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.43 (a)**

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? ☒ Yes ☐ No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  
  ☒ Yes  ☐ No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  ☒ Yes  ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  ☒ Yes  ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  ☒ Yes  ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  ☒ Yes  ☐ No

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  ☒ Yes  ☐ No  ☐ NA

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  ☒ Yes  ☐ No  ☐ NA

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  ☒ Yes  ☐ No  ☐ NA

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?  ☒ Yes  ☐ No

- Does such an assignment not ordinarily exceed a period of 30 days?  ☒ Yes  ☐ No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the basis for the facility’s concern for the inmate’s safety?  ☒ Yes  ☐ No

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the reason why no alternative means of separation can be arranged?  ☒ Yes  ☐ No

115.43 (e)
In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

During the period currently under review, there were no cases where an inmate was involuntarily segregated due to being at high risk for sexual victimization. According to the staff who were interviewed, if there ever was such a need, it would likely be for less than 24 hours. The staff reported that there are other options that could be utilized prior to segregation placement. There is very little inmate movement in the facility, and when the inmates are in their housing units, they are always directly supervised. If needed, an inmate can be moved into a different housing unit or moved to the front of the unit where they may have additional staff support.

Policy CKJ 216, Sexual Misconduct states in part, as follows:

“Inmates at high risk for sexual victimization or who have alleged to have suffered from sexual abuse shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Inmates placed in segregation housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document the opportunities that have been limited, duration of the limitation, and the reason for such limitation. The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made, the facility shall document the basis for the facility’s concern for the inmate’s safety, and the reason why no alternative means of separation can be arranged. Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.”

**REPORTING**

**Standard 115.51: Inmate reporting**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No

- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No

- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No

- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes) ☒ Yes ☐ No ☒ NA

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No

- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*
Instructions for Overall Compliance Determination Narrative

There are several different ways an inmate can report sex abuse and sexual harassment in the facility including: tell any staff member in person; write correspondence through the inmate kiosk; call the posted hotline number (888-299-0911), which rings to the sheriff’s office dispatcher; call the toll free number to an outside agency (800-572-7463); tell a family member to call the facility reporting number or the outside agency number; write to the outside advocate (address is posted); or write a grievance using the kiosk. The inmates who were interviewed were all aware that they could make a report for another inmate, and that they could report anonymously. If inmates wish to remain anonymous, they can report the incident but not use their name. Interviews with staff showed that staff are aware that they are required to take all reports of sex abuse or sexual harassment seriously and to report all such incidents to their supervisor immediately. Staff also said they were aware of at least one way to privately report retaliation or sexual harassment or sex abuse of an inmate, such as speaking directly to the sheriff, or calling the hotline number.

The information posted below is from the facility PREA policy, CKJ 315, which reads in part, as follows:

a) Staff may privately report sexual abuse, sexual harassment, or sexual misconduct by completing an incident report marked confidential and submitting it directly to the Agency PREA Coordinator. The PREA Coordinator shall ensure the allegation is investigated in accordance with this policy while maintaining the anonymity of the reporting staff. The PREA Coordinator shall maintain a confidential file of the privately reported allegations. In the event that the PREA Coordinator is unavailable all reports shall be submitted to either the Assistant Jail Administrator or Jail Administrator

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. ☒ Yes ☐ No

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (c)
- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- 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 ☐ No ☐ NA

**115.52 (d)**

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

**115.52 (e)**

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☐ Yes ☐ No ☐ NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

**115.52 (f)**

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA
After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)  ☒ Yes ☐ No ☐ NA

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 ☐ No ☐ NA

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 ☐ No ☐ NA

Does the initial response and final agency decision document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  ☒ Yes ☐ No ☐ NA

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 ☐ No ☐ NA

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 ☐ No ☐ NA

115.52 (g)

If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

An inmate can report a sexual abuse grievance at any time. Inmates are not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint. The agency shall issue a final agency decision on the merits of any portion of the grievance within 90 days of the initial filing of the grievance. If a decision is not reached within the 90-day period, the facility can claim an extension of up to 70 days. According to the PC, the inmate would be notified if there is an extension and provided a date for when a decision will be made. If the inmate does not receive a response during the time allotted for reply, they can consider the absence of a
response to be a denial. Posted below are portions of the facility grievance procedures, CKJ 505, Inmate Grievance Procedures.

Emergency Sexual Abuse Grievance Procedures:

Inmates that feel that they are subject to imminent sexual abuse may file an emergency grievance. Inmates can file an emergency grievance following the same procedures as a sexual abuse grievance, with the exception the inmate shall print on the envelope that it is an emergency. Once the PREA Coordinator or Jail Administrator reviews the grievance, and ensures the allegation, and in investigation is initiated within 48 hours. The Jail Administrator and the Chief Detective reviews the investigation and shall issue a final agency decision within five calendar days. The initial response and final agency decision shall document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates the inmate filed the grievance in bad faith.

1. Jail personnel will provide inmates who wish to report a sexual abuse grievance with a copy of the grievance form used at the Cherokee County Jail (Attachment 1, FORM CKJ 505C Cherokee County Jail Inmate Grievance Form Attachment 2, FORM CKJ 505A Cherokee County Jail Inmate Request Form.)

2. Inmate grievance or request forms are completed and addressed to the PREA Coordinator, will be delivered by personnel without alteration, interference or delay to the PREA Coordinator. The form may be given in a sealed envelope to a Jail Officer for delivery. An inmate can submit an alleged sexual abuse grievance at any time. An inmate may not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint. Nothing mentioned in this section restricts the ability of the Cherokee County Sheriff’s Office to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.

3. Upon receipt of an Inmate Grievance alleging sexual abuse, the PREA Coordinator will review the grievance to insure the complaint is valid enough to conduct an investigation. The PREA Coordinator will pass the valid grievances to the Investigator to be logged into the PREA Module System. Once the grievance has been logged into the PREA Module System; The Investigator will conduct an Investigation in accordance with CKJ Policy 311 Internal affairs and CKJ Policy 216 Sexual Misconduct Investigations.

4. The agency shall issue a final agency decision on the merits of any portion of the grievance within 90 days of the initial filing of the grievance. If a decision is not reached within the 90 day period, the agency may claim an extension of up to 70 days. The inmate shall be notified of such extension and provide a date by which a decision will be made. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

The Cherokee County Sheriff’s Office will attempt to provide reasonably needed and requested resources for victims of sexual abuse or misconduct. These services include third parties, fellow inmates, staff members, family members, attorneys, and outside advocates. If the inmate declines such assistance, the agency will document such decision.
According to the PC, there have been very few allegations of sex abuse or sexual harassment made during this period of review. According to the policy, all grievances related to sex abuse are to be routed to the inmate coordinator; however, that position no longer exists, as it was absorbed into the Jail Administrator position. In practice, all grievances of a sexual nature go to the PC for review. Upon receipt, he will discuss with the Jail Administrator and a course of action is set in motion. As a result of the process, it appears that any such grievance that pertains to sex abuse or sexual harassment is treated like it was submitted as an emergency grievance. When a grievance is received, it goes directly to staff who have the authority to take immediate action. The facility policy reflects the same time periods as listed in this standard. In reality, inmates can expect to have a final decision in most cases within five days, not 90 days. There are very few grievances of this nature submitted, and none for review in the current period. Staff who were interviewed said that inmates are given instructions on how to submit a grievance as part of their orientation. If asked, inmates are provided an envelope they can use to submit a paper grievance as a way to submit a complaint anonymously. Staff were aware that inmates are not required to attempt any type of informal resolution prior to filing a grievance related to sex abuse. Staff reported that if an inmate submitted such a grievance to them, they would immediately notify the PC about it.

Inmates who were interviewed all reported that they are aware of the grievance process, and reported that they felt confident that any complaint submitted having to do with sex abuse or sexual harassment would be taken seriously by staff and acted upon in a timely fashion. The auditor asked an inmate to demonstrate how to file a grievance using the inmate kiosk. The auditor was able to file a mock grievance on the kiosk. Grievances filed in this manner go directly to the PC’s desk. Although there is no option on the kiosk for submitting an emergency grievance, as stated, all grievances pertaining to sex abuse or sexual harassment are treated as an emergency grievance.

There were no actual “Emergency Grievances” filed during this period.

**Standard 115.53: Inmate access to outside confidential support services**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No

- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) ☐ Yes ☐ No ☒ NA

- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

### 115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No
115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒  Exceeds Standard *(Substantially exceeds requirement of standards)*

☒  Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐  Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

Posters and flyers written in English and Spanish were posted in every living unit and contained the phone numbers and addresses of two agencies who have agreed to provide outside support services for inmate victims of sex abuse or sexual harassment. The facility has entered into written agreements with Safehouse Crisis Center, and Spring River Mental Health and Wellness Center. Interviews with inmates highlighted the facility’s efforts to create a “reporting culture.” All the inmates the auditor spoke with, formally and informally, were knowledgeable about to whom to report and how to report if they were the victim of sex abuse or sexual harassment. Inmates are able to make calls from the dayrooms of the unit where they live.

The auditor spoke with the executive director for Safehouse and was told that, if requested by the facility, they will provide victim advocacy services for any inmate who was the victim of sex abuse. She further stated that inmates would be told, prior to services being provided, what information will be forwarded back to the facility and what information could be kept confidential.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No
☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

Information about third-party reporting is available to inmates as part of the orientation material; it is also available through the inmate Kiosk.

Inmates who were interviewed were aware of this provision. Staff were aware of this provision and knew to handle third-party reports of sex abuse or sexual harassment in the same manner as any other report. There is a link on the website www.cherokeecountysheriff.com that contains a toll-free number for any person to use in order to report sex abuse or sexual harassment. The auditor called the number and learned that it rings into the Cherokee County Sheriff’s dispatch center, which is manned 24 hours per day, 365 days per year. All of the dispatchers who work for the Sheriff’s office have been trained to handle such calls, and they will direct all information to the facility administration and the PC for direct action if needed.

**OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT**

**Standard 115.61: Staff and agency reporting duties**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? ☒ Yes ☐ No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent...
necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? ☒ Yes ☐ No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☒ Yes ☐ No

- Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ☒ Yes ☐ No

115.61 (e)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

Per the PREA policy, staff are required to report any suspicion or knowledge of any type of sex abuse or sexual harassment, including reports made by a third party or made anonymously. The staff who were interviewed were all very well aware of this provision. Staff also reported that they are required to report any kind of retaliation or suspected retaliation against any staff or inmate who had reported sex abuse or sexual harassment. Staff who were interviewed all stated that they were trained to not talk about any kind of investigation with others except on a need-to-know basis.

Interviews with the medical staff showed that they are required to immediately report cases to the facility administration. Medical staff stated that they tell inmates up front about their duty to report such incidents to facility administration.

**Standard 115.62: Agency protection duties**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

Policy CKJ 216, *Sexual Misconduct Investigations*, outlines some of the actions that may be taken in the event an inmate were to report being in imminent danger of being sexually abused. The policy reads in part, as follows:

“If it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate at risk of victimization. The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.”

Supervisory staff who were interviewed were knowledgeable about the actions to be taken should there be a situation where an inmate was in imminent danger of being sexually abused. Those interviewed stated that they would keep the inmate in a safe area and contact the PC in order to make the determination of the best action to take to keep everyone safe. The PC reported that there were no incidents where an inmate was in imminent danger during the past year. The information below is also from policy CKJ 216, which reads in part, as follows;

*Any staff member that observes incidents or behaviors that cause a reasonable concern that an inmate may be at significant risk of sexual victimization shall document this incident or observation on an incident report marked confidential, consistent with Department Policy 504, Report Writing. A copy of this report shall immediately be forwarded to the Shift Commander, Jail Administrator, PREA Coordinator, and Investigator.*

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)
- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? ☒ Yes ☐ No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)

- Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Facility policy CKJ 216 describes the actions to be taken in the event an inmate reports being sexually abused at a previous jail or other facility. The policy reads in part, as follows:

“If any employee or volunteer of the Cherokee County Sheriff’s Office is notified of allegations of sexual misconduct concerning an inmate while housed in another correctional facility, that employee or volunteer shall immediately notify the PREA Coordinator, who will then relay the information to the Cherokee County Jail Administrator and Captain Detective. The Cherokee County Jail Administrator, as soon as practical, but no later than within 72 hours, will notify the Jail Administrator of the jurisdiction which has been charged original custody of the inmate. In addition, the Cherokee County Jail Administrator will insure that the law enforcement agency with primary investigative jurisdiction where the alleged abuse occurred has been notified.”

Security staff who were interviewed reported that during the past year, there were no inmates booked into the jail who reported being sexually abused at another facility.

The auditor interviewed the Sheriff and the PC, and both reported that during the past year, there were no inmates received from previous institutions who reported being sexually abused. There were no requests made for information about inmates transferred from the Cherokee County Jail. However, if a notification were to be received, the PC would ensure the allegation was thoroughly investigated.

According to the PC, if an inmate were to make such a report, he would prepare information for the Sheriff so that he could make the notification.
Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The auditor interviewed many staff members of the jail including security staff, first responders, medical staff, food service staff, administrative staff, and other staff who have inmate contact. The majority of those interviewed were able to fully describe the facility’s PREA response action steps. Almost every person described that first, they would separate to individuals involved and keep everyone safe. Most staff mentioned that there is a PREA checklist which they would use to make sure they were able to follow the PREA policy
and to meet the PREA standards. Without referring to the check list, the majority of those interviewed stated that they would:

- Separate victim and perpetrator
- Notify the shift supervisor
- Notify the PC
- Protect any potential crime scene
- Speak with victim and perpetrator individually to ensure that no evidence contained on their body or clothing is destroyed.
- Ask the victim to not brush their teeth, wash themselves, do not eat or drink or use the bathroom

The shift supervisor was able to produce the checklist which included getting the victim seen by medical/mental health staff if needed, and a list of notifications that must be made.

Non-security staff were clear that they should call for security staff immediately and try to keep the victim separate from everyone until help arrived.

Staff who were interviewed were somewhat unsure about what the timeframe is for collecting forensic medical evidence. Answers varied from 24 hours to 96 hours. It is recommended for the PC to contact the hospital where the victim would be taken and ask for a definitive answer to share with staff.

Because there are so few allegations of sex abuse made at the facility, the auditor recommends conducting a PREA response drill in order to allow staff to walk through the actions necessary in a non-emergency setting.

**Standard 115.65: Coordinated response**

*All Yes/No Questions Must Be Answered by the Auditor to Complete the Report*

115.65 (a)

- 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 ☐ No

**Auditor Overall Compliance Determination**

- ☐ Exceeds Standard (*Substantially exceeds requirement of standards*)
- ☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ Does Not Meet Standard (*Requires Corrective Action*)

**Instructions for Overall Compliance Determination Narrative**

There is a full PREA coordinated response plan in place which includes a response checklist, the PREA policy, and the Dispatchers PREA checklist. The checklists contain the items listed below in addition to the duties of the shift supervisor as described previously. Policy CKJ 216, *Sexual Misconduct Investigations*, reads in part, as follows:
1. The Sexual Abuse First Responder Checklist shall be used upon report of an allegation of inmate sexual abuse. The first initial actions of security and non-security staff members are noted below.

   a) The first security staff member to respond to the report shall be required to:
      i. Separate the alleged victim and abuser.
      ii. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
      iii. Request that the alleged victim not take any actions that could destroy physical evidence.
      iv. Ensure the alleged abuser does not take any actions that could destroy physical evidence.
      v. Notify the immediate supervisor, who will notify the Jail Administrator.
      vi. Notify medical or mental health.

   b) The first non-security staff member to respond to the report shall be required to:
      i. Separate the alleged victim and abuser.
      ii. Request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff.
      iii. Notify a security staff member

If it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate at risk of victimization.

The PREA actions to be taken by first responders, investigators, and the PC, are covered during the PREA training. The auditor was able to review the training materials and match it with the staff signature sheets. If it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate at risk of victimization. Because the Cherokee County Jail is a small facility, it is conceivable that almost any staff member could be called upon to be a first responder to a PREA incident. Interviews with uniformed first responders and non-uniformed staff members revealed an excellent knowledge of the actions required to keep inmates safe, collect usable evidence, protect possible crime scenes, and produce criminal casework worthy of prosecution.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- 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 inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☒ No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination
☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

There is no collective bargaining at the Cherokee county jail, therefore this standard is not applicable.

### Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No

- Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No

- 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 ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes ☐ No

- 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 ☐ No

- 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 ☐ No

- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes ☐ No

115.67 (e)

- 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 ☐ No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative
There have been no cases of retaliation discovered or reported during this period of review. However, the facility does have a mechanism for monitoring against retaliation. Policy CKJ 216 outlines the procedures and some of the options available to protect inmates and staff who have reported sex abuse. The policy reads in part, as follows:

“Following an allegation that a staff member has committed sexual abuse against an inmate, the inmate shall be informed when the staff member is no longer posted within the inmate’s unit, the staff member is no longer employed at the facility, and if the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility. Following an inmate’s allegation that he or she was sexually abused by another inmate, the agency shall inform the inmate, if still incarcerated in their facility, when they learn the alleged abuser has been indicted on or convicted of a charge related to sexual abuse in the facility. These notifications shall be documented. For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Monitoring shall occur at least every 30 days and shall include:

a) Any inmate disciplinary reports;
b) Housing changes;
c) Program changes;
d) Negative performance reviews;
e) Reassignment of staff;
f) Periodic status checks.

Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The obligation to monitor shall terminate if the agency determines that the allegation is unfounded. If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.”

The PC is the person who is designated to monitor inmates and staff who report sex abuse or sexual harassment. At the time of the on-site visit, there were no inmates or staff being monitored; however, there is a process for doing so. The facility utilizes a form to keep track of the beginning and ending dates of the 90-day monitoring period. The form allows for space to write notes from face-to-face interviews scheduled by the PC. During interviews, inmates expressed to the auditor on more than one occasion that they felt the facility was not a sexualized environment and that they were confident jail staff would do what is needed to keep them safe.

### Standard 115.68: Post-allegation protective custody

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*
**Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

**Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

There were no instances during this period of review where an inmate was placed into segregation due to being the victim of sex abuse. Per the PC, if that were to become necessary, placement would be for the shortest amount of time possible, and only after considering and rejecting other available options. He went on to say that they would follow the process outlined in the PREA policy and then their actions would be documented in writing and kept in the PC’s office.

Policy CKJ 216, **Sexual Misconduct Investigations**, states in part, as follows:

“Inmates at high risk for sexual victimization or who have alleged to have suffered from sexual abuse shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Inmates placed in segregation housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document the opportunities that have been limited, duration of the limitation, and the reason for such limitation. The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made, the facility shall document the basis for the facility’s concern for the inmate’s safety, and the reason why no alternative means of separation can be arranged. Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.”

The use of segregation is not typically used for this reason at this facility. There are several different living units in the facility where someone could be housed as an alternative to segregation placement. Inmates on many of the units have no need to leave their unit; yard time, showers, and meals all happen on the unit.

**INVESTIGATIONS**

## Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes  ☐ No  ☐ NA

**115.71 (b)**

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes  ☐ No

**115.71 (c)**

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes  ☐ No

- Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes  ☐ No

- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes  ☐ No

**115.71 (d)**

- 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  ☐ No

**115.71 (e)**

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? ☒ Yes  ☐ No

- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes  ☐ No

**115.71 (f)**

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes  ☐ No

- 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  ☐ No

**115.71 (g)**

- 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  ☐ No
115.71 (h) ▪ Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No

115.71 (i) ▪ Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? ☒ Yes ☐ No

115.71 (j) ▪ Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No

115.71 (k) ▪ Auditor is not required to audit this provision.

115.71 (l) ▪ When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

There were no criminal PREA investigations completed during this period of review, and only one allegation of sexual harassment was investigated.

Policy CKJ 216, *Sexual Misconduct Investigations*, outlines clearly that all reports of sex abuse and sexual harassment will be investigated. The policy goes on to explain, if the allegation involves an employee or volunteer of the Cherokee County Sheriff's Office, the Captain Detective may impanel the Professional Standards Team (in accordance with agency policy on Internal Investigations) to conduct a parallel administrative investigation to any potential criminal investigation. Should a conflict of interest be identified, the Sheriff will request that the investigation be conducted by the Kansas Bureau of Investigation. Training records show that three staff have completed specialized training on conducting sex abuse investigations in a confinement setting. Two of those staff, (the PC and jail administrator) are responsible for completing
administrative PREA investigation that are not criminal in nature. One PREA investigator is a full-time certified law enforcement officer who serves as a detective for the sheriff’s office. As such, he has completed the basic training required by the state and graduated from the Kansas Law Enforcement Training Center. He is responsible for completing PREA investigations that appear to be criminal in nature. Furthermore, he has been trained on how to collect physical evidence as well as DNA evidence. Through the interview with the investigator, it was reported that he does not determine the credibility of anyone in the jail based solely on their status as an inmate. He also stated that an investigation would be followed to completion even if the inmate involved is released or the employee involved terminates employment. There have been no criminal cases of sex abuse made in the jail in the past year. However, it is believed that should a case be presented to the prosecutor, it would be prosecuted. The written reports and other documentation were very organized and, even though the case that was reviewed was unsubstantiated, there was good documentation to show all the individuals involved were interviewed.

According to the PC, investigative reports are kept for at least five years after the inmate has been released from custody.

Policy CKJ 216, Sexual Misconduct Investigations, reads in part, as follows:

A. Investigation

2. The Cherokee County Sheriff’s Office shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. If the allegation involves an employee or volunteer of the Cherokee County Sheriff’s Office, the Captain Detective may impanel the Professional Standards Team (in accordance with agency policy on Internal Investigations) to conduct a parallel administrative investigation to any potential criminal investigation. Should a conflict of interest be identified, the Sheriff will request that the investigation be conducted by the Kansas Bureau of Investigation.

3. If the Kansas Bureau of Investigation conducts the investigation, the Cherokee County Sheriff’s Office will cooperate with investigators to remain informed about the progress of the investigation. The Cherokee County Sheriff’s Office shall request the relevant information in order to inform the inmate.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Per the policy CKJ 216, Sexual Misconduct Investigations:

Evidentiary Standard for Administrative Investigations

The Cherokee County Sheriff’s Office shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

This is the standard of proof used in making an administrative determination as to whether an allegation of sex abuse or sexual harassment is substantiated, unsubstantiated, or unfounded. It is not the standard of proof for making a criminal determination of guilty or not guilty in a court of law.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? ☒ Yes ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☒ Yes ☐ No ☐ NA

115.73 (c)

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever:
  - The staff member is no longer posted within the inmate’s unit? ☒ Yes ☐ No
  - The staff member is no longer employed at the facility? ☒ Yes ☐ No
  - The staff member has been released from custody? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever:
The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (d)

- Following an inmate’s allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

- Following an inmate’s allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

There were no allegations of sex abuse investigated during the period currently being reviewed and therefore, no documentation to review; however, there is a process.

Policy CKJ 216, Sexual Misconduct Investigations, reads in part, as follows:

Following an allegation that a staff member has committed sexual abuse against an inmate, the inmate shall be informed when the staff member is no longer posted within the inmate’s unit, the staff member is no longer employed at the facility, and if the agency learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility.
Following an inmate’s allegation that he or she was sexually abused by another inmate, the agency shall inform the inmate, if still incarcerated in their facility, when they learn the alleged abuser has been indicted on or convicted of a charge related to sexual abuse in the facility. These notifications shall be documented.

**Investigative Outcome:** When an investigation is concluded, it will be labeled one of the following:
- **Substantiated** – An allegation that was investigated and determined to have occurred.
- **Unsubstantiated** – An allegation that was investigated and the investigation produced insufficient evidence as to whether or not the event occurred.
- **Unfounded** – An allegation that was investigated and determined NOT to have occurred.

When an inmate is given any of the required notifications, it is documented using the jail management software. In addition, there are forms used which contain the information and a signature line for the inmate to sign as acknowledgement of the notifications.

### DISCIPLINE

**Standard 115.76: Disciplinary sanctions for staff**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.76 (a)**
- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

**115.76 (b)**
- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

**115.76 (c)**
- 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 ☐ No

**115.76 (d)**
- 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 ☐ No

- 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 ☐ No
Auditor Overall Compliance Determination

☐ Exceeds Standard  *(Substantially exceeds requirement of standards)*

☒ Meets Standard  *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

Policy CKJ 306, **Employee Discipline**, reads in part, as follows:

*As outlined in the PREA standards 115.76 (a) staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse*

Policy CKJ 304, **Rules of Conduct**, reads in part, as follows:

*Officers and employees who become the subject of citations or arrest actions will immediately notify the Sheriff in writing. Any officer or other employee who has reason to know they are the subject of a criminal or civil action will immediately notify their supervisor, who will in turn notify the Sheriff.*

There have been no disciplinary actions taken against a staff member for violation of department sex abuse and sexual harassment rules. Through interviews with administrative staff, it was learned that if such disciplinary actions were necessary, criminal charges may also be brought. The incident may also be reported to the Kansas Behavioral Sciences Regulatory Board (BSRB) or other licensing board if the employee/contract employee served as a medical/mental health provider or other social service provider, such as a social worker or addition counselor.

**Standard 115.77: Corrective action for contractors and volunteers**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.77 (a)**

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No

**115.77 (b)**

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No
Auditor Overall Compliance Determination

- ☐ Exceeds Standard *(Substantially exceeds requirement of standards)*
- ☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
- ☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

There were no PREA allegations made against any volunteer or contractor during the period currently under review. However, there is a policy which outlines the actions to be taken should an allegation of sex abuse be made.

Through interviews with the PC and other administrative staff, it was determined that if an allegation of sex abuse were made, the volunteer/contract staff would be prohibited from having inmate contact while the investigation was underway. If, at the conclusion of the investigation, the person was deemed to have engaged in prohibited behavior with an inmate, corrective action would be made which would be commensurate with the seriousness of the infraction up to and including the filing of criminal charges and/or reporting the violation to the Kansas BSRB.

Policy CKJ 216, *Sexual Misconduct Investigations*, reads in part, as follows:

*Any investigation involving an employee or volunteer will be conducted in accordance with the Cherokee County Sheriff’s Office Professional Standards Team Internal Investigation Policy, where Garrity and Miranda Warnings will be applied, as required, given the particular circumstances.*

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**Standard 115.78: Disciplinary sanctions for inmates**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ☒ Yes ☐ No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)
When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No

115.78 (d)

If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ☒ Yes ☐ No

115.78 (e)

Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? ☒ Yes ☐ No

115.78 (f)

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 ☐ No

115.78 (g)

If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The jail does utilize a formal disciplinary process which contains written rules and standard sanctions for rule violations. Sanctions are based on the seriousness of the violation and the inmate’s disciplinary history. If appropriate, the inmate’s mental health status and level of comprehension are also considered during the penalty phase of the process. Inmates are aware of the disciplinary process and are provided with a copy of the inmate rules at the time of orientation. The facility does prohibit all forms of sexual activity between inmates. An inmate would not be disciplined for engaging in sexual contact with a staff member unless it was determined that the staff member did not consent to the activity. Inmates will not be disciplined for making a PREA allegation unless it is determined that the inmate intentionally made an allegation knowing the allegation was untrue. There were no disciplinary actions taken upon for inmate on inmate sex abuse during this period of review.
Policy CKJ 506 reads in part, as follows:

**Disciplinary Sanctions following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse**
Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any should be imposed. Since the facility offers therapy, counseling and other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. The agency may discipline an inmate for sexual contact with staff only finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The Cherokee County Sheriff’s Office prohibits all sexual activity between inmates.

### MEDICAL AND MENTAL CARE

**Standard 115.81: Medical and mental health screenings; history of sexual abuse**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.81 (a)**
- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
  - ☒ Yes  ☐ No  ☒ NA

**115.81 (b)**
- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
  - ☐ Yes  ☐ No  ☒ NA

**115.81 (c)**
- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure
that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (d)

- 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 ☐ No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Jail policy outlines that those inmates who report prior sexual victimization, regardless of whether it occurred inside or outside the correctional system or time frame, are scheduled to be seen by a qualified practitioner within 14 days for a follow-up meeting. Policy CKJ 315 PREA, reads in part, as follows:

“If indicated that the inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether in an institutional setting or in the community, staff shall ensure the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.”

An interview with the facility medical provider indicated that she is readily available and willing to respond to the facility any time she is requested. She currently is scheduled to provide services weekly, or as needed. The Practitioner was very committed to providing quality care to the inmates. She is licensed to provide medical or mental health services.

The auditor interviewed the PC and learned that the risk assessment completed on each inmate at book-in is directed to the PC for review. During the review, if the PC sees that an inmate disclosed previous sexual
victimization, he will direct the risk assessment to the nurse for follow-up. The auditor verified this information with the nurse and subsequently reviewed several inmate files.

The auditor was provided with a list of inmate names who reported previous sexual victimization at the time of book-in to the jail. From that list, the auditor selected several names and was able to verify that each inmate was seen by the nurse for follow-up service within 14 days of their arrival unless they were released prior to the 14 days. Per the PC, inmates under the age of 18 are not housed in the jail.

The facility also ensures that inmates with a history of perpetrating sex abuse are scheduled for follow-up service with the nurse within 14 days of arrival, which is not required by this standard, thereby exceeding the standard.

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

*All Yes/No Questions Must Be Answered by the Auditor to Complete the Report*

**115.82 (a)**

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
  - Yes ☒  No ☐

**115.82 (b)**

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes  ☐ No

- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes  ☐ No

**115.82 (c)**

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? ☒ Yes  ☐ No

**115.82 (d)**

- 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  ☐ No

**Auditor Overall Compliance Determination**

- ☒ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

- ☑ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

There were no instances of sex abuse reported during this period of review. However, there is a process and policy should there ever be a need to provide emergency medical services.

Per the PREA policy, CKJ 315 PREA, any victim of sex abuse would receive timely and unimpeded access to emergency medical treatment and crisis intervention, if needed. Per the same policy, emergency contraception, and treatment for sexually transmitted diseases would also be made available, at no charge to the inmate for services. Services are available to inmate victims of sex abuse regardless of their willingness to disclose information relevant to the investigator. Access to services for the victim of sexual abuse will not be dependent on their willingness to report allegations or provide testimony. There is not 24-hour medical/mental health staff at the jail; however, the medical/mental health staff person is on call and is always willing to respond. If necessary, the victim would be transported to Via Christie hospital for SANE/SART services and additional follow-up treatment, if medically indicated.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.83 (a)**

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? ☒ Yes ☐ No

**115.83 (b)**

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes ☐ No

**115.83 (c)**

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No

**115.83 (d)**

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) ☒ Yes ☐ No ☐ NA
115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services?  (N/A if “all-male” facility.  Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) ☒ Yes ☐ No ☐ NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)

- 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 ☐ No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The facility nurse (ARNP) provider advised that when appropriate, she does disclose the limitations of confidentiality and her duty to report instances of sex abuse. She reported that since her time at the jail, there has been no case of sex abuse that would have required her to deliver or offer any related services. She also said that female victims of sex abuse would be offered timely pregnancy testing and all lawful pregnancy-related services. All victims would be offered testing for sexually-transmitted diseases. She reported that the services which would be provided would be at least the same as one would receive in the community.

Policy CKJ 315 PREA reads in part, as follows:
Inmates are encouraged to report all allegations of sexual abuse and/or sexualized behavior regardless of when the incident occurred. Access to services for the victims of sexual abuse will not be dependent on their willingness to report allegations or provide testimony. Reporting of alleged sexual abuse by inmates is critical to the timely delivery of necessary services to the victim and to holding perpetrators accountable and making them less likely to reoffend. All such reports will be investigated within the limitations of information provided and the willingness of inmates and/or others to cooperate. When the victim of a PREA incident can be identified, they will be offered timely information about and with timely access to emergency contraception and sexually-transmitted infections prophylaxis, in accordance with professionally accepted standards of care, and where medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Female sex abuse victims will be offered testing for sexually transmitted diseases and offered timely pregnancy testing and all lawful pregnancy related services. Provided with at least the same care that one would receive in the community and at no cost to the inmate.

DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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<td><strong>115.86 (a)</strong></td>
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<td>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 ☐ No</td>
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<td><strong>115.86 (b)</strong></td>
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<td>Does such review ordinarily occur within 30 days of the conclusion of the investigation?  ☒ Yes ☐ No</td>
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<td><strong>115.86 (c)</strong></td>
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<td>Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  ☒ Yes ☐ No</td>
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<td><strong>115.86 (d)</strong></td>
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<td>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 ☐ No</td>
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<td>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 ☐ No</td>
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<td>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 ☐ No</td>
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- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No

- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No

- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? ☒ Yes ☐ No

### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No

## Auditor Overall Compliance Determination

- ☒ Exceeds Standard *(Substantially exceeds requirement of standards)*
- ☐ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
- ☐ Does Not Meet Standard *(Requires Corrective Action)*

### Instructions for Overall Compliance Determination Narrative

According to the PC, there were no allegations investigated during this period of review which would meet the criteria to undergo a sex abuse incident review. There is a process and a form that would be completed for each case. The form contains spaces for the team to comment on each of the areas required by this standard. The team members are outlined in the policy.

Policy CKJ 218 **Sexual Misconduct Investigations** reads in part, as follows:

At the conclusion of any investigation into allegations of sexual abuse or misconduct, The Cherokee County Sheriff’s Office shall conduct a sexual abuse incident review including where the allegation has not been substantiated, unless the allegation has been determined unfounded. Such review shall ordinarily occur within 30 days of the conclusion of the investigation. The review team for The Cherokee County Sheriff’s Office may include the following: Captain Detective, Jail Administrator, Assistant Jail Administrator, Sheriff and any others deemed appropriate by the Sheriff who will convene to review the case, and consider the following:

- Whether the allegation or investigation indicated a need to change policy or practice to better prevent, detect, or respond to sexual abuse,
- Whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender or intersex identification status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Assess the adequacy of staffing levels in that area during different shifts.
• Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

• Prepare a report of the findings, including but not necessarily limited to determinations made pursuant to the above elements that were considered, and any recommendations for improvement which should be submitted and reported to the Sheriff and PREA Coordinator.

The Cherokee County Sheriff's Office shall then either implement the recommendations for improvement or shall document its reasons for not doing so.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

▪ 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 ☐ No

115.87 (b)

▪ Does the agency aggregate the incident-based sexual abuse data at least annually? ☒ Yes ☐ No

115.87 (c)

▪ 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 ☐ No

115.87 (d)

▪ 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 ☐ No

115.87 (e)

▪ Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☐ Yes ☐ No ☒ NA

115.87 (f)

▪ Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) ☒ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination
☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The auditor was provided with a document titled PREA Data Collection Summary 2018 which contained uniform data for each allegation of sex abuse, even though the allegation was determined to be unfounded. The information contained was sufficient to complete the Survey of Sexual Violence provided by the Department of Justice (DOJ).

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? ☒ Yes ☐ No

115.88 (b)

- Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse ☒ Yes ☐ No

115.88 (c)

- 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 ☐ No

115.88 (d)
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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility did attempt to collect data; however, there was only one allegation of sex abuse made during the period under review and that case was determined to be unfounded. A report was generated but due to the exceptionally low number of occurrences in the facility, it contains little information that can be used for year-to-year comparison. The report was reviewed by administrative staff at the facility including the Jail Administrator. The report is posted on the public website at https://www.cherokeecountykssheriff.com/jail

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained? ☒ Yes ☐ No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ☒ Yes ☐ No
Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

All of the PREA documentation gathered by the facility is securely maintained within the confines of the jail facility, or on the facility’s electronic servers utilized by the jail management software. There is only one facility so there is no data to aggregate from other facilities. The annual report is posted on the facility’s public website at https://www.cherokeecountykssheriff.com/jail

The report does not contain any personal identifiers. Per the PC, PREA data is stored by the facility for at least ten (10) years.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- 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 ☐ No

115.401 (b)

- Is this the first year of the current audit cycle? *(Note: a “no” response does not impact overall compliance with this standard.)* ☒ Yes ☐ No

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

- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? *(N/A if this is not the third year of the current audit cycle.)* ☐ Yes ☐ No ☒ NA
115.401 (h) Did the auditor have access to, and the ability to observe, all areas of the audited facility?
☒ Yes ☐ No

115.401 (i) Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?
☒ Yes ☐ No

115.401 (m) Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
☒ Yes ☐ No

115.401 (n) Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?
☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard ((Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The auditor was allowed to observe all areas of the facility and was provided a private area in which to conduct interviews. All documentation that was requested was received.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The audit report from three years ago was posted on the facility’s public website.
AUDITOR CERTIFICATION

I certify that:

☒ The contents of this report are accurate to the best of my knowledge.

☒ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.1 Auditors are not permitted to submit audit reports that have been scanned.2 See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Ray Reno ___________________________ 05/21/2020
Auditor Signature Date

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1 See additional instructions here: https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110.