Prison Rape Elimination Act (PREA) Audit Report

Adult Prisons & Jails

☐ Interim  ☒ Final

Date of Report  October 5, 2019

Auditor Information

<table>
<thead>
<tr>
<th>Name: Elisabeth Copeland</th>
<th>Email: <a href="mailto:sunflowerorgsolutions@gmail.com">sunflowerorgsolutions@gmail.com</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name: Click or tap here to enter text.</td>
<td></td>
</tr>
<tr>
<td>Mailing Address: 603 Boeckman Drive</td>
<td>City, State, Zip: Seneca, KS 66538</td>
</tr>
<tr>
<td>Telephone: 785-294-0830</td>
<td>Date of Facility Visit: August 26, 2019</td>
</tr>
</tbody>
</table>

Agency Information

<table>
<thead>
<tr>
<th>Name of Agency: Washington County Sheriff's Office</th>
<th>Governing Authority or Parent Agency (If Applicable): Washington County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address: 301 B Street</td>
<td>City, State, Zip: Washington, KS 66968</td>
</tr>
<tr>
<td>Mailing Address: same as above</td>
<td>City, State, Zip: same as above</td>
</tr>
<tr>
<td>The Agency Is:</td>
<td></td>
</tr>
<tr>
<td>☐ Military</td>
<td>☐ Private for Profit</td>
</tr>
<tr>
<td>☐ Municipal</td>
<td>☒ County</td>
</tr>
<tr>
<td>Agency Website with PREA Information: NA</td>
<td></td>
</tr>
</tbody>
</table>

Agency Chief Executive Officer

| Name: NA | Email: Click or tap here to enter text. | Telephone: Click or tap here to enter text. |

Agency-Wide PREA Coordinator

| Name: NA | Email: Click or tap here to enter text. | Telephone: Click or tap here to enter text. |
| PREA Coordinator Reports to: | Number of Compliance Managers who report to the PREA Coordinator |
| Click or tap here to enter text. | Click or tap here to enter text. |
## Facility Information

<table>
<thead>
<tr>
<th>Name of Facility:</th>
<th>Washington County Jail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address:</td>
<td>301 B Street</td>
</tr>
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<tr>
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<td>Same as above</td>
</tr>
<tr>
<td>The Facility Is:</td>
<td>☒ County</td>
</tr>
<tr>
<td>Facility Type:</td>
<td>☒ Jail</td>
</tr>
<tr>
<td>Facility Website with PREA Information:</td>
<td>NA</td>
</tr>
<tr>
<td>Has the facility been accredited within the past 3 years?</td>
<td>☒ No</td>
</tr>
<tr>
<td>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):</td>
<td>☐ ACA ☐ NCCHC ☐ CALEA ☐ Other (please name or describe: Click or tap here to enter text. ☒ N/A</td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

### Warden/Jail Administrator/Sheriff/Director

<table>
<thead>
<tr>
<th>Name:</th>
<th>Justin Cordry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email:</td>
<td><a href="mailto:jcordry@washingtoncountyks.gov">jcordry@washingtoncountyks.gov</a></td>
</tr>
<tr>
<td>Telephone:</td>
<td>785-325-2293</td>
</tr>
</tbody>
</table>

### Facility PREA Compliance Manager

<table>
<thead>
<tr>
<th>Name:</th>
<th>Gage Wilson</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email:</td>
<td><a href="mailto:gwilson@washingtoncountyks.gov">gwilson@washingtoncountyks.gov</a></td>
</tr>
<tr>
<td>Telephone:</td>
<td>785-325-2293</td>
</tr>
</tbody>
</table>

### Facility Health Service Administrator

<table>
<thead>
<tr>
<th>Name:</th>
<th>Click or tap here to enter text.</th>
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<tbody>
<tr>
<td>Email:</td>
<td>Click or tap here to enter text.</td>
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<tr>
<td>Telephone:</td>
<td>Click or tap here to enter text.</td>
</tr>
<tr>
<td><strong>Facility Characteristics</strong></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------------</td>
<td>---</td>
</tr>
<tr>
<td>Designated Facility Capacity:</td>
<td>39</td>
</tr>
<tr>
<td>Current Population of Facility:</td>
<td>39</td>
</tr>
<tr>
<td>Average daily population for the past 12 months:</td>
<td>30</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>Females ☐</td>
</tr>
<tr>
<td>Age range of population:</td>
<td>18 - 75</td>
</tr>
<tr>
<td>Average length of stay or time under supervision:</td>
<td>35.61 days</td>
</tr>
<tr>
<td>Facility security levels/inmate custody levels:</td>
<td>Minimum, medium, maximum</td>
</tr>
<tr>
<td>Number of inmates admitted to facility during the past 12 months:</td>
<td>121</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>121</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>112</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: (N/A if the facility never holds youthful inmates)</td>
<td>Click or tap here to enter text.</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: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):</td>
<td>☐ Federal Bureau of Prisons</td>
</tr>
<tr>
<td>Number of staff currently employed by the facility who may have contact with inmates:</td>
<td>14</td>
</tr>
<tr>
<td><strong>Number of staff hired by the facility during the past 12 months who may have contact with inmates:</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Number of contracts in the past 12 months for services with contractors who may have contact with inmates:</strong></td>
<td>0</td>
</tr>
<tr>
<td><strong>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</strong></td>
<td>8</td>
</tr>
<tr>
<td><strong>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</strong></td>
<td>12</td>
</tr>
</tbody>
</table>

### Physical Plant

| **Number of buildings:** | 1 |

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.

| **Number of inmate housing units:** | 4 |

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.

| **Number of single cell housing units:** | 0 |
| **Number of multiple occupancy cell housing units:** | 2 |
| **Number of open bay/dorm housing units:** | 2 |
| **Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):** | 2 |

| 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) | ☒ Yes ☐ No ☒ N/A |
| Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)? | ☒ Yes ☐ No |
### Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?

- **No**

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

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are medical services provided on-site?</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Are mental health services provided on-site?</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

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

- ☒ 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:
  - 2

- 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.
  - ☒ Agency investigators
  - ☐ Facility 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

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

Pre-Audit:

On July 23, 2019 the Auditor emailed the “Notice of Audit’ to the Washington County Jail (WCJ). The Auditor received verification the notice of audit was posted on July 24, 2019.

WCJ provided pre-audit documentation to the Auditor on August 21, 2019. It was well organized and easy to follow. The Auditor reviewed the documentation and completed the audit tool identifying any areas of concern.

On August 21, 2019, the Auditor mailed a tentative agenda to WCJ outlining the schedule of onsite-portion of the audit.

On-site Audit:

The on-site portion of WCJ's PREA audit was conducted August 26, 2019. The Auditor was greeted by the Jail Administrator. A brief opening meeting was held with the sheriff which was immediately followed by a complete tour of the facility and interviews. The Auditor was provided a list of staff on duty during the on-site portion of the audit and a roster of clients.

The Auditor selected thirteen (13) inmates to interview: 13 random (male and female) inmates and one who reported sexual abuse during the risk assessment. At the time of the audit, WCJ did not have any clients with physical or cognitive disabilities, who were limited English proficient, identified as youthful inmate, who identified as transgender or intersex or had reported sexual abuse.

The Auditor was provided a private, comfortable room to conduct interviews in with staff and clients.

Of the 13 random inmates, one inmate refused to participate in the audit process. By the end of the onsite portion of the audit, the Auditor interviewed 12 random inmates and one inmate who reported sexual abuse during the risk assessment.

The Auditor interviewed a total of six random staff from both shifts and completed 14 targeted interview protocols. These interviews consisted of Agency Head, PREA Coordinator, Retaliation Monitor, Human Resources, two Investigators, two Volunteers, Incident Review Team Member, staff who Supervise Segregated Housing, Intake, two staff who conduct PREA risk screening, and an Upper Level Supervisor who conducts Unannounced Rounds.

While onsite, the Auditor reviewed one investigative file, verified background checks, reviewed curriculum and rosters for twelve staff members, obtain copies of blank Transgender Preference form and the risk screening tool and also reviewed 16 inmate files.

Post Audit:
The Auditor reviewed all notes from interviews conducted, the tour of WCJ and onsite documentation and completed the final audit report. WCJ was found to be compliant with all standards.

**Facility Characteristics**

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

The Washington County Jail (WCJ) is a 39-bed minimum/medium-security county jail county and state inmates. WCJ houses for three agencies. It was built in 1996. The average daily population is 39 inmates. The facility houses both male and female inmates.

WCJ’s inmate population consists of male and female adults between the ages of 18 and 65 with the average length of stay being 35.61 days. WCJ does not house juveniles or youthful offenders. On the first day of the audit, WCJ’s population was 39.

WCJ consists of one (1) building with four (4) housing pods. WCJ currently has 12 staff who has contact with the inmates and eight (8) volunteers. There has been no expansions or modifications to the buildings since the last PREA audit in 2016. No additional cameras have been installed since that time.

The following is a breakdown of WCJ’s four housing pods:

**Male inmates are housed in Pod B, C, and D**

B and D Pods is a dorm layout with six bunkbeds. These pods each of one shower protected by a full wall and half door. The shower cannot be seen by camera view or when entering the pod. Each pod has one toilet protected by a half wall and half door. Again, inside this area cannot be seen by the camera or by any part of the pod. The urinal, located in each pod, is also protected by wall, preventing incidental viewing by staff. These pods each of two cameras.

C Pod contains five cameras and includes double bunked cells. This pod has one shower protected by a full wall and half door. The shower cannot be seen by camera view or when entering the pod. Each cell has its own toilet and there is enough privacy for inmates to perform bodily functions without staff viewing. There are no cameras inside the cells.

**Females are housed in Pod A.**

A Pod consists of two cells. Each cell contains a bunkbed and a one boat (portable bed) located on the floor. Each cell has a shower and a toilet. Each are out of camera view and are protected from staff incidental viewing.

During the tour, the Auditor found a notice of audit posted in each pod.

WCJ also has two holding cells that are also used for disciplinary segregation and protective custody. Each cell has one toilet out of staff view. If an inmate is placed in these holding cells they shower in a separate area. This shower has curtain to prevent incidental viewing by staff. There are no cameras in the shower area – only in the hallway outside of the shower.

Strip searches are also conducted in the shower area.
WCJ provides onsite inmate meals. The kitchen is operated by one staff member and one trustee. There are no walk-in freezers or storage areas and cameras are present. The size of the kitchen prevents no blind spots.

WCJ also does laundry onsite. There is one camera located in this area and it is for staff only. There is ledge from the laundry into the booking area. This allows staff to move laundry freely between both areas and allows other staff to observe the activity inside laundry.

Visitation at WCJ is non-contact. This area had PREA signage pamphlets available for family and friends.

**Summary of Audit Findings**

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

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

**Standards Exceeded**

Number of Standards Exceeded: 0  
List of Standards Exceeded: NA

**Standards Met**

Number of Standards Met: 44

**Standards Not Met**

Number of Standards Not Met: 0  
List of Standards Not Met: NA
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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s
conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

a) WCJ has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. WCJ Policy W-20.1, Prison Rape Elimination Act Prevention and Planning, dated December 28, 2015, states, “WCJ has zero tolerance toward all forms of sexual abuse and sexual harassment within the facility.” This same policy outlines how WCJ will implement the agency approach to preventing, detecting, and responding to sexual abuse and sexual harassment. This done through defining sexual abuse and sexual harassment and outlining sanctions for staff and inmates who have been found to have participated in these prohibited behave WCJ PREA policies also include how to report sexual abuse in and harassment as well as outlines the agency’s responsibilities in responding to those reports.

b) WCJ has designated PREA Coordinator who is a part of the organizational structure. WCJ policy W-20.1 states, “PREA Coordinators Responsibilities: Assist with the development and implementation of PREA-related policies; develop and coordinate procedures to triage allegations received and identify, monitor, and track incidents of sexual abuse; identify and track referrals of allegations to law enforcement and prosecutors; develop and implement comprehensive system to audit compliance with PREA policies and applicable laws; oversee monitoring of PREA compliance with private and non-department public entities contracted for offender and inmate confinement; keep management informed of PREA-related issues; maintain a memorandum of understanding for external victim advocacy; maintain PREA content for the department website, including publication of required information and documents; and conduct training for all staff on PREA compliance and policy.”

The PREA Coordinator reported he has enough time and authority to manage all his PREA-related responsibilities. He also states, “It is very acting when I identify a gap it gets closed. Administration is always available by phone or by email.” Washington County Sheriff's Office only has one facility; WCJ. There are no other PREA Compliance Managers or Coordinators.

c) NA WCJ only operates one facility.

<table>
<thead>
<tr>
<th>Standard 115.12: Contracting with other entities for the confinement of inmates</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Yes/No Questions Must Be Answered by the Auditor to Complete the Report</td>
</tr>
</tbody>
</table>

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? (N/A if the agency does not contract with private agencies or other entities for the confinement
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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCJ does not contract with private agencies or other facilities for the confinement of inmates.

This was confirmed through interviews with the PREA Coordinator, Jail Administrator and other administration.

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 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

*The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

a) WCJ policy 1-20.2, “Prison Rape Elimination Act Supervision and Monitoring, dated December 28, 2015, states, “Adequate staffing at WCJ consists of two officers per shift. During any other, the officer may call dispatch and the sheriff, undersheriff, or deputy to come over and assist you as needed. WCJ is able to have the ambulance dispatched to come assist and transport any medical problem to the Washington County Hospital.”

**RECOMMENDATION:** It is recommended that WCJ create a formalize staffing plan to match the practice of this facility. While administrative staff state the current staffing practice is based on correctional practices, composition of current inmate population, programming, and video monitoring, a formalized plan will serve as a record for your annual reviews. This record will also serve document there have been no judicial findings of inadequacy, federal investigations, oversight from external bodies and that WCJ follows all local and state laws.

b) NA There have been deviations from WCJ’s staffing plan. WCJ policy W-20.2 states, “If the staffing plan indicated above is altered or compromised, documentation will be generated to justify the deviation from the plan. The documentation is made in the jail log located in Enterpol.” **NOTE:** Enterpol is the name of the electronic Jail Management System WCJ uses to maintain all jail records.

c) WCJ policy W-20.2 also states, “Any deviations will be discussed on an annual basis with the WCJ PREA Committee. The committee will address and document whether adjustments are needed to: the staff plan established; the facility’s deployment of video monitoring systems and other monitoring technologies; and the resources the facility has available to commit and ensure adherence to the staffing plan.”
The PREA Coordinator reports, “Policy requires two officers at a time on each shift. If we need to cover a shift due to an officer calling in, we call in another officer to work the shift.” He reports there has never been a time when two officers were not on duty.

d) WCJ requires upper-level supervisors to conduct unannounced rounds to identify and deter staff sexual abuse and harassment. WCJ policy W-20.2 states, “On an irregular and unannounced pattern, members of the leadership team at WCJ will conduct unit rounds to deter and detect staff sexual abuse and sexual harassment. Members of the leadership team that are expected to conduct these rounds include: Sheriff, Undersheriff, Jail Administrator, and PREA Coordinator. Once an unannounced round is completed the staff member completing the round will document such round in the Enterpol Jail System. The round documentation will be in the Jail Log. Unannounced rounds will be completed on all shifts. At time of conducting such rounds the staff will not be informed of the purpose and will not be alerted prior.”

A supervisor reports they conduct unannounced rounds. They advise these rounds are documented in the jail log. When asked how they prevent staff from alerting other staff, they state, “It is very hard to do in a jail this size. They are all use to supervisors and administration coming through and checking things out.”

The Auditor verified unannounced rounds are being conducted and that said rounds are being documented in the Jail Log.

**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

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WCJ does not house youthful inmates. This was confirmed through interviews with administrative and random staff.

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

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

a) WCJ policy W-20.3, Prison Rape Elimination Act Gross-gender Viewing and Searches, dated December 28, 2015, states, “WCJ employees will not conduct cross-gender strip searches or cross-gender visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by a medical practitioner. Efforts will be made in exigent circumstances to obtain the jail administrator prior approval.”

This same policy defines exigent circumstances as “any set of temporary and unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order of the facility.”

There have been zero cross-gender strip searches or cross-gender visual body cavity searches at WCJ since their last PREA audit in 2016.

b) All staff interviewed report while cross-gender pat searches are allowed when necessary, male staff do not pat search female inmates.

All female inmates interviewed report they have not been restricted from activities due to having only male staff on duty. All females report they have never been pat searched by a male officer.

c) WCJ policy W-20.3 states, “Employees will document in the jail management system; Enterpol, all cross-gender strip searches and cross-gender visual body cavity searches in this manner: open the Incarceration File in Enterpol; Open the General Information within the incarceration file; select all information; search for the inmate you did the search on (they are listed in numerical order); add Supplementary Record to their file.”

There have been zero cross-gender strip searches or cross-gender visual body cavity searches at WCJ since their last PREA audit in 2016.

d) WCJ has implemented policy and procedures that enable inmates to have privacy while showering, performing bodily functions and changing clothes. WCJ policy W-20.3 states, “Inmates will be allowed to shower, perform bodily functions, and change clothing with non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia; except in exigent circumstances or when such viewing is incidental to routine cell/dorm checks.”

This same policy also states, “Officers of the opposite gender shall announce their presence when entering a living unit. Announcement will be made in a manner such as ‘male/female officer on the unit,’ ‘male/female officer on the floor,’ the announcement will be documented in the jail log book for each shift daily; the entry will be logged as ‘Cross-gender Supervision;’ the above announcement is
necessary for each officer that is assigned to the post of an opposite gender living unit; announcements such as the one indicated above also applies to non-uniformed staff when they enter a housing unite of the opposite sex. This announcement is necessary each time they enter a living unit of the opposite sex. Signage will be posted in a conspicuous place for inmates that may have been absent from the housing unit when the announcement was made.”

During the tour of WCJ, cross-gender announcements were made as we entered each pod.

All inmates interviewed report announcements are made over the intercom letting them know both genders will be on duty. Most also report staff make announcements as they enter the pods.

All inmates report they have never been fully unclothed before an officer of the opposite gender. The inmates also report staff are considerate if they know they are in the showers.

All staff interviewed report an announcement is made at the beginning of each shift which states, “Officers of both genders will be on duty.” They also report announcements are made while entering the pods.

e) WCJ policy W-20.3 states, “Staff will not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmates’ genital status. If the inmate’s genital status is unknown, it may be determined through conversation with the inmate, by reviewing medical records, or, if necessary, by learning that information a part of a broader medical examination conducted in private by a medical practitioner.”

This policy also states, “During the initial booking process with a transgender or intersex inmate, staff will ask the inmate if they prefer to be searched by a male or female officer. This information will be recorded on the PREA screening form in the open box text area following question #5.”

WCJ staff will also complete the “Transgender Preference Form” at booking. This form asks the transgender inmate their birth sex; gender identification, pronoun preference, housing preference and search preference. This form is then signed by the staff person conducting the interview and by the inmate.

All staff interviewed report WCJ has never had a transgender or intersex inmate. They also report if an inmate identified themselves as transgender, they would not search them to determine genital status. Most staff also state this is in policy.

WCJ had no inmates identified as transgender or intersex in custody while the Auditor was onsite. This was confirmed through interviews with administrative and staff interviews.

f) WCJ policy W-20.3 states, “WCJ will train staff on how to conduct a cross-gender pat down search and searches of transgender and intersex inmates in a professional and respectful manner and in the least intrusive manner possible.”

All staff interviewed report watching a video on transgender and cross-gender pat searches.

While onsite, the Auditor reviewed WCJ’s training records from classes taken through National Institute of Corrections (NIC) and videos from the National PREA Resource Center (PRC). Twelve staff members completed watching the video Cross Gender/Transgender Pat Searches developed by PRC.
Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

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

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 ensure that written materials are provided in formats or through methods that ensure effective communication with 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

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a, b) WCJ policy W-20.6, “Prison Rape Elimination Act Inmate Screening, Orientation, Education,” dated December 28, 2015, states, “WCJ will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as inmates who have limited reading skills. Dear or hearing impaired: training is available through print or close captioning. Visually impaired: training is available through audio. Limited English proficiency: volunteer is on call. Otherwise disabled or limited reading abilities: Training is available through staff.
WCJ PREA Orientation Information Acknowledgement of Receipt is provided in English and in Spanish. It also requires staff to verify with the inmate the inmate's ability to read and comprehend information given to them. If the inmate is unable to read, the staff must document on the form that they read the information to the inmate. This form requires both the inmate and staff to sign and date when this is completed.

The Sheriff advises there are several ways for inmates with disabilities or who can't speak English to learn about PREA and to report sexual abuse. He advises there a bilingual staff and the PREA Video is close captioned.

There were no inmates identified as deaf, hearing impaired, blind, visually impaired, limited English proficient, or otherwise disabled in custody while the Auditor was onsite. This was confirmed through interviews with administrative and random staff and speaking with other inmates.

c) WCJ does not allow the use of inmate interpreters.

All staff report they would not use inmate interpreters for a PREA report. However, most state they would allow an inmate to act as interpreter for daily communication in the pod. All state there are bilingual staff they could use if needed and a local volunteer.

There were no inmates identified as deaf, hearing impaired, blind, visually impaired, limited English proficient, or otherwise disabled in custody while the Auditor was onsite. This was confirmed through interviews with administrative and random staff and speaking with other inmates.

In learning about the services Domestic Violence Association of Central Kansas (DVACK), a rape crises center, offers WCJ. The Auditor learned they provide interpreters for over 150 languages. Inmates who are identified as limited English proficient will still have access to advocacy services if needed.

**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

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a) WCJ policy W-20.4, “Prison Rape Elimination Act Employee Hiring and Promotion Practices,” dated December 28, 2015, states, “WCJ does not hire or promote anyone who may have contact with inmates, and shall not enlist the 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); has been convicted or engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (2) of this section.”

Employee, volunteer, and contractor files are current and reflect the required background checks.
b) This same policy also states, “WCJ shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.”

The Sheriff states all applicants have a “III and NCIC check” completed to determined criminal history. He adds this is also done on every employee annually.

c, d, e) WCJ policy W-20.4 states, “WCJ performs a criminal background check on all individuals that have accepted a contingent job offer. A background records check is also completed on contractors and volunteers that may have contact with the inmates. Criminal background checks will also be completed on employees/contractors/volunteers at least once every 5 years from the date of hire. WCJ will also attempt to contact all prior institutional employers for information on substantiated allegations of sexual abuse (Form 103).”

The Sheriff reports in addition to the III and NCIC background checks, previous institutional employers are also contacted.

f) This same policy also states, “WCJ will ask all applicants and employees who may have contact with the inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring and promotions and in any interview or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.”

The Sheriff states all applicants are asked about previous misconduct during the interview process. He also adds current employees are told they have a continuing affirmative duty to disclose any such misconduct.

g) WCJ policy W-20.4 states, “Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.”

h) This same policy also states, ‘Unless prohibited by law, WCJ will 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 for work.”

The Sheriff states former employees’ misconduct would be reported to any potential employer who contacted them.

**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
• 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)*

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WCJ has not installed or updated their video monitoring system since their last PREA audit in 2016.

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.

115.21 (h)

- 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

☒ 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

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Washington County Sheriff’s Office conducts all criminal and administrative investigations of sexual abuse and sexual harassment.

a) WCJ Policy W-20.8, “Prison Rape Elimination Act Investigations: Criminal and Administrative, Referrals, Coordinated Response, Evidentiary Standards, Disciplinary Sanctions and Reporting to Inmates,” dated December 28, 2015, states, “To the extent WCJ is responsible for investigating allegations or sexual abuse, WCJ will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.”

All staff report they are familiar with how to preserve evidence in the jail. They also report the Sheriff and Undersheriff are responsible for investigating all allegations of sexual abuse or sexual harassment.

b) This same policy states, “Protocol is based on Washington County Sheriff's standard Law Enforcement Investigation practices.” While WCJ does not house youthful inmates or juvenile offenders, this protocol is developmentally appropriate for youth.

c) WCJ policy W-20.9, “Prison Rape Elimination Act Medical and Mental Health Care,” dated December 28, 2015, states, “All victims of sexual abuse will be offered access to forensic medical examinations. Victims will bear no financial burden for having the exam. Exams will be conducted at
the Salina Regional Health Center (Salina). Forensic medical exams are conducted by a SAFE or ‘SANE within 12 hours of the incident. Other qualified medical health practitioners may conduct the exam when a SAFE or SANE is not available.”

Salina Regional Hospital offers forensic nursing services 24 hours a day, seven days a week. All forensic nurses are trained in working with victims, collecting evidence from head to toe examinations, provides photo documentation of injuries and will testify in court.

WCJ has not had a request for a forensic examination since their last PREA audit in 2016.

d) This same policy also states, “The PREA Coordinator will attempt to make a victim advocate from the Domestic Violence Association of Central Kansas (DVACK) in Salina available to the victim in person or by other means. WCJ and DVACK have a verbal understanding to make victim advocates available when requested. If a victim advocate is not available, WCJ will provide a qualified agency staff member, or qualified community-based organization staff member.”

DVACK advises the services offered to WCJ includes a 24 hotline, emotional support and understanding to victims, crises counseling, safety planning and information on referrals.

e) WCJ policy W-20.9 states, “If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews. The advocate will provide emotional support, crises intervention, information, and referrals.”

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation.

f) NA Washington County Sheriff’s Office is responsible for conducting all criminal and administrative investigations of sexual abuse and sexual harassment at WCJ.

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

Washington County Sheriff’s Office conducts all criminal and administrative investigations of sexual abuse and sexual harassment. In the past 12 months there has been one allegation of staff on inmate sexual abuse (voyeurism) that resulted in a criminal and administrative investigation.

a, b) WCJ Policy W-20.8, “Prison Rape Elimination Act Investigations: Criminal and Administrative, Referrals, Coordinated Response, Evidentiary Standards, Disciplinary Sanctions and Reporting to Inmates,” dated, December 28, 2015, states, “WCJ will ensure an administrative or criminal investigation is completed on ALL allegations sexual abuse and sexual harassment. If the allegation is criminal in nature it will be referred to the Washington County Sheriff’s Office for investigation. All referrals to the Washington County Sheriff’s Office will be documented in an investigative report by the WCJ PREA Coordinator. Allegations that do not involve potentially criminal behavior will be investigated internally (Administrative Investigation) by the WCJ PREA Coordinator or designee.”
The Sheriff advises all allegations of sexual abuse and sexual harassment are investigated. He also states, “Any staff person can take a complaint. They would then go to their supervisor who would then notify the PREA Coordinator. The PREA Coordinator then reports it to the Jail Administrator who then notifies me or the Undersheriff for an investigation.”

Both investigators report all allegations are required to be reported to them for investigation.

c) NA Washington County Sheriff’s Office is responsible for all investigations.

### 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

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

a, b) WCJ trains all employees who may have contact with inmates. WCJ policy W-20.5, “Prison Rape Elimination Action Employee and Volunteer Training and Discipline,” dated December 28, 2015, states, “WCJ will train all employees who may have contact with inmates on the following topics: Its zero-tolerance policy 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; inmates’ right to be free from sexual abuse and sexual 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 response to signs of threatened and actual sexual abuse; how to avoid inappropriate relationship with inmates; how to communicate effectively and professionally 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.”

All staff were able to discuss the training they received which included zero-tolerance, and their responsibilities in preventing, detecting and responding to sexual abuse. While most could not remember specifically training on communicating with lesbian, gay, bisexual, transgender or intersex inmates, they all responded they would treat them with respect and would not treat them any differently than any other inmates.

While onsite, the Auditor reviewed WCJ’s training records from classes taken through National Institute of Corrections (NIC). Twelve staff members completed PREA Audit Process and Instrument Overview, PREA Behavioral Health Care for Sexual Abuse Victims in a Confinement Setting, PREA Coordinators Roles and Responsibilities, Preventing and Addressing Sexual Abuse, PREA Your Role Responding to Sexual Abuse, and Cross Gender/Transgender Pat Searches.

c) This same policy states, “WCJ will train all employees during orientation. WCJ shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies though: NIC online training, coordinated response posters and PREA materials throughout the facility.”

d) WCJ Policy W-20.5 states, “WCJ shall document, though employee signature or electronic verification that employees understand the training they have received.”

Auditor was able to verify certificates and acknowledgments of employees.

**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

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

a) WCJ trains all contractors and volunteers. WCJ policy W-20.5, “Prison Rape Elimination Action Employee and Volunteer Training and Discipline,” dated December 28, 2015, “All volunteers and contractors who have contact with inmates shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.”

The Auditor spoke with two volunteers. Both volunteers report they received training from WCJ on zero-tolerance and how to report sexual abuse.

While onsite, the Auditor reviewed training records for volunteers and contractors from 2016 to 2019. In these files, 18 volunteers (fellowships and AA) and six contractors (mechanics and phone) competed the PREA Volunteer and Contractor Training. Each signed an acknowledgement stating they understood the training they received and the zero-tolerance policy WCJ has in place.

This training covers: the right to be free from abuse, zero-tolerance, definitions of sexual abuse, how to report sexual abuse and sexual harassment, detecting sexual abuse and maintaining professional relationships with inmates.

b) This same policy also states, “The type and level of training is based on the services they provide and the level of contact they have with inmates. Unsupervised contractors/volunteers will receive classroom training on PREA. Supervised contractors/volunteers will review and acknowledge understanding of the facilities zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents by signing the PREA acknowledge form (#115-2).”

Both volunteers report their training consisted of the zero-tolerance policy and to report sexual abuse and sexual harassment.
c) WCJ policy W-20.5 states, “WCJ shall maintain documentation confirming that volunteers and contractors understand the training they have received. Training will be repeated every two years. WCJ will also maintain on file a signed “acknowledgement of compliance” form from all contractors and volunteers that have contact with inmates.”

**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

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a, b, c) WCJ policy W-20.6, “Prison Rape Elimination Act Inmate Screening, Orientation and Education,” dated December 28, 2015, states, “Written policy, procedure and practice ensure that information is provided to offenders about sexual abuse/assault including: prevention/intervention, self-protection, reporting sexual assault and treatment and counseling. During the initial intake meeting with the booking staff, the inmate will receive a copy of the “Zero-tolerance” pamphlet. The booking staff will document on the acknowledgement of receipt that the offender has received the pamphlet. Inmates will be required to sign for the receipt of the PREA pamphlet. Within 30 days of intake, WCJ will provide comprehensive education to inmates through video (PREA: What you Need to Know) regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. Current inmates who have received such education shall be educated within one year of the effective date of the PREA standards and shall 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.”
One staff person was interviewed about the intake process at WCJ. This staff person reports, “We have them watch a 15-minute video as part of the booking process. It covers the zero-tolerance rules and how to report sexual abuse and sexual harassment. The video also discovers how allegations will be responded to while they are here.”

All inmates report watching a PREA video at the time of booking. They also report information on reporting sexual abuse is on the television located in their pod.

WCJ Inmate Handbook contains information on reporting sexual abuse, PREA educations and risk screening. This information is located on page 20.

While on site, the Auditor reviewed 16 inmate files. Each file contained a signed PREA Acknowledgment form. The signature date on the form corresponded with the admission date to WCJ.

d) This same policy states, “Appropriate provisions will be made as necessary for the inmates not fluent in English those with disabilities and those with low literacy levels. WCJ will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as inmates who have limited reading skills. Dear or hearing impaired: training is available through print or close captioning. Visually impaired: training is available through audio. Limited English proficiency: volunteer is on call. Otherwise disabled or limited reading abilities: Training is available through staff.”

WCJ PREA Orientation Information Acknowledgement of Receipt is provided in English and in Spanish. It also requires staff to verify with the inmate the inmate’s ability to read and comprehend information given to them. If the inmate is unable to read, the staff must document on the form that they read the information to the inmate. This form requires both the inmate and staff to sign and date when this is completed.

e) WCJ policy W-20.6 states “WCJ will maintain documentation of inmate participation in these education sessions. WCJ will have inmates sigh a roster when they attend the educational video. This roster will be forwarded to the PREA Coordinator where he/she will enter the date of attendance into the sign in schedule. Signed roster will be maintained on file by the PREA Coordinator.”

f) The Auditor reviewed WCJ’s “Zero-tolerance” pamphlet given to every inmate at booking. In addition, every pod has a TV with information on how to report sexual abuse or sexual harassment.

**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

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Washington Sheriff’s Office employs two investigators who conduct criminal and administrative investigations into all sexual abuse and sexual harassment allegations in WCJ.
WCJ policy W-20.5, “Prison Rape Elimination Act Employee and Volunteer Training and Discipline,” dated December 28, 2015, states, “Investigators who investigate allegations of sexual abuse are trained in conducting sexual abuse investigations in confinement settings. This includes: Department of Justice approved PREA investigator training; techniques for interviewing sexual abuse victims; and proper use of Miranda and Garrity warnings; Sexual abuse evidence collection in confinement settings; criteria and evidence required to substantiate a case for administrative action or for prosecution referral. WCJ will maintain documentation on all personnel that has completed the required specialized training in conducting sexual abuse investigations.”

Auditor reviewed training records while onsite. Twelve staff, including both investigators, completed the NIC training, “Investigating Sexual Abuse in Confinement Settings.”

Both investigators report they have taken specialized training through NIC on sexual abuse investigation in a confinement setting. One of investigators states, “It was a lot more specific and careful when it came to interviews and evidence preservation.” Both investigators report the NIC training also covered proper use of Miranda and Garrity warning and criteria and evidence required to substantiate a case for administrative or prosecution referral.

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

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

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a, b) N/A WCJ does not have any full- or part-time medical or mental health care practitioners employed by the agency.

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

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

WCJ performs a PREA Screen Form on every inmate booked in jail.

a, b) WCJ policy W-20.6, “Prison Rape Elimination Act Inmate Screening, Orientation, Education” dated December 28, 2015, states, “Within 72 hours of arrival at WCJ all inmates will be assessed during the intake screening for their risk of being sexually abused by other inmates or sexually abusive towards other inmates.”

Two staff who perform risk screening were interviewed during this audit. Both state the initial risk screening is done at the time of booking. One states that while they have 24 – 48 hours to complete this assessment, they always do it as part of the booking process.

All inmates interviewed report they were asked the risk screening questions at booking. When asked if these questions has been asked again since they have been here, all reported yes. They advise the Auditor these same questions were asked again a few weeks after they arrived.

WCJ Inmate Handbook contains information on reporting sexual abuse, PREA educations and risk screening. This information is located on page 20.

c, d) This same policy states, “Such assessments will be conducted using an objective screening instrument (attached). The screening instrument considers the following criteria (Sexual Victimization): Whether the inmate has a behavioral, physical or developmental disability; Age of the Inmate; Physical stature of the inmate; Whether the inmate has been previously incarcerated; Whether the inmate’s criminal history is exclusively nonviolent; Whether the inmate has prior convictions of sex offenses
against an adult or child; How does the inmate perceive their sexual orientation; Whether the inmate has previously experienced sexual victimization; and the inmate’s own perception of vulnerability.”

The Auditor reviewed the PREA Screening Form and found all components of 115.41(d) listed.

e) WCJ’s PREA Screening Form asks the following questions (per this subsection): Offender has prior convictions of violent offenses; Offender has prior acts of violent sexual abuse out of an institute; Inmate has prior institutional incidents of sexually assaulting others; and, inmate has a history of institutional violence.

Two staff who perform risk screening were interviewed during this audit. Both state the risk screening looks at age, charges, and build of the inmate. They state this assessment is done in a one-on-one format away from other inmates who may be in the booking area.

f, g) WCJ policy W-20.6 states, “Within a set time period, not to exceed 30 days from the inmate’s arrived at the facility, the facility will reassess the inmate’s risk of victimization or abusiveness If new information is received by the facility that was not forthcoming at the time of admission. An inmate’s risk level shall be reassessed when warranted due to a referral, request, an incident of sexual abuse or receipt of additional information that ears on the inmate’s risk of sexual victimization or abusiveness.”

Both staff interviewed report WCJ reassesses inmates no later than 30 after the initial intake. They advise they also perform reassessments when new information is gathered.

All inmates interviewed report they were asked the risk screening questions at booking. When asked if these questions has been asked again since they have been here, all reported yes. They advise the Auditor these same questions were asked again a few weeks after they arrived.

While on site the Auditor reviewed WCJ’s PREA Screening tracking sheet. This sheet contains the inmate’s name, date of 1st assessment and the due date for the 30-day assessment. The Auditor reviewed 16 inmate files and found all 16 inmates had their initial PREA assessment completed at the time of admission. These same inmates all had a reassessment completed within 30 days of admission.

h, i) WCJ does not discipline inmates for refusing to answer questions, or for not disclosing complete information during the PREA Intake Screening. This is also found in WCJ policy W-20.6. WCJ has appropriate controls in place to control the dissemination of information obtained through the PREA Intake Screening.

The PREA Coordinator reports only those people “who need to know” have access to the information gathered on the risk assessment. This includes himself, the Jail Administrator and administration.

Both staff interviewed state just the “people who need to know” have access to the information on the PREA Risk Screening form. They both advised this information is kept in their files and supervisors must sign off on it first.

**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 judgement.) ☒ 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 judgement.) ☒ 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 judgement.) ☒ 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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does
not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

a, b) WCJ policy W-20.6, “Prison Rape Elimination Act Inmate Screening, Orientation, Education" dated December 28, 2015, states, “WCJ shall use information from the risk screening required by 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. WCJ shall make individualized determinations about how to ensure the safety of each inmate.”

This same policy also states, “Inmates who are identified as high-risk to abuse others will be “tagged” on the master count board located in Master Control. This tag will serve as a reminder to the officers that when housing these inmate’s special consideration is required as they can only be housed with other high-risk abusers.”

Two staff who perform risk screening were interviewed during this audit. Both state information gathered from the risk screening is used to determine housing placement, medical and mental health referrals.

c, d, e, f) WCJ policy W-20.6 states, “In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing or programming assignments, WCJ will 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. Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. The WCJ PREA coordinator will complete this task and record this contact. A transgender or intersex inmate’s own view with respect to his or her own safety shall be given serious consideration. Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Inmates who identify themselves as transgender or intersex during the screening process will be advised they can request an opportunity to shower separately from other inmates.”

Both staff interviewed about the risk screening process report WCJ has never had a transgender or intersex inmate. However, they both state they would take their feelings on their own safety into consideration when determining placement. Both also state transgender and intersex inmates would be offered separate shower options.

There were no inmates identified as transgender or intersex in custody while the Auditor was onsite. This was confirmed interviews with administrative and random staff.

g) This same policy also states, “WCJ shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates.”

The PREA Coordinator reports WCJ is not subject to a consent decree, legal settlement, or legal judgment requiring this type of placement. This was also echoed by the Sheriff of Washington County Sheriff’s Office.

There were no inmates identified as transgender or intersex in custody while the Auditor was onsite. This was confirmed interviews with administrative and random staff.
**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

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a, b, c, d, e) WCJ policy W-20.11, “Prison Rape Elimination Act Housing,” December 28, 2015 states, “Based on information gathered at the time of intake screening these results will drive the housing assignment of the inmates. Inmates that are considered at risk to victimized based on the responses recorded on the inmate PREA screening form will be placed in locations that are easily observable by staff members, have limited if any blind spots, and are not occupied by inmates that have a history of violence and/or sex-related crimes. The shift supervisor is responsible to make this housing assignment. Continual monitoring and assessing a housing assignment is completed an any indication that the risk of sexual misconduct is rising a new housing assignment will be ordered.

Use of Protective Custody: Involuntary placement into segregated housing is NOT permitted simply because an inmate is at high risk for victimization. The shift supervisor with the assistance of the Administrator and Sheriff will assess all available alternatives and segregated housing will only be issued if all alternatives are deemed inappropriate or pose a direct threat to the well-being of the inmate. In completing this assessment an inmate can be housed in protective custody for no longer than 24 hours.

If placed in protective custody on an involuntary basis WCJ staff will document the following: Basis of the facilities concern for inmates safety; Reason why no alternative means of separation can be
arranged; Every 30 days a review will be completed on the inmate to determine if there is a continuing need for separation from the general population; and, Such assignment shall no ordinarily exceed 30 days as alternative means of separation likely can be arranged.

Inmates placed in protective custody for the above purpose shall have access to programs, privileges, and work opportunities to the extent possible. If there is restricted access the facility will document: The opportunities that have been limited; duration of the limitation; reasons for such limitations.

Assigning a transgender or intersex inmate: WCJ will consider each housing and programming assignment for a transgender or intersex inmate on a case-by-case basis always focused on inmate health and safety and whether placement would present a security issue; Serious consideration must be given to the inmate’s own views with respect to his/her own safety; Transgender and intersex inmates must be given the ability to shower separately from other inmates.”

One staff person was interviewed as it relates to supervising inmates in segregated housing. This staff person states, “If they are not in segregation due to discipline, then they have full access to everything.” The staff person also reports inmates are only placed in involuntary segregation only if necessary. If this is used, and if possible, they will only be in segregation only until the investigation is complete. The staff person also reports this placement is also reviewed every 30 days to determine if it can change.

There were no inmates housed in protective custody based on solely on their risk of sexual victimization on the day the Auditor was onsite. There has been no inmate housed in protective custody base on their risk of sexual victimization in the past 12 months.

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

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Instructions for Overall Compliance Determination Narrative

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a, b, c, d) WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “WCJ has made available numerous channels for an inmate to make an internal report of sexual abuse, sexual harassment, and retaliation by other inmates or staff for reporting sexual abuse or sexual harassment. Inmates can report in the following ways: Verbal report to any staff, volunteer, or contractor; Written report to any staff, volunteer, or contractor; Third party reporting; Inmate report/request forms. WCJ allows for inmates to report sexual abuse or sexual harassment to a public or private entity that is not part of the agency in the following ways: Call the National Sexual Abuse Hotline from any inmate phone.”
All staff interviewed were able to tell the Auditor multiple ways for inmates to report abuse. This includes telling staff, family, and calling the hotline. Staff also reports they can notify the Attorney General’s Office if they wanted to make a report privately. They also report they have access to the hotline number.

All inmates interviewed were able to tell the Auditor multiple ways they could report sexual abuse or sexual harassment.

During the tour of WCJ, the Auditor found a pamphlet title, “PREA Information for Family and Friends,” located in Visitation. This pamphlet contains information on zero-tolerance, that all allegations will be investigated, medical and mental health referrals, how to recognize signs of sexual abuse and how to report sexual abuse and sexual harassment.

The brochure WCJ Zero-tolerance is also given to the inmates at the time of admission to WCJ.

WCJ Inmate Handbook contains information on reporting sexual abuse, PREA educations and risk screening. This information is located on page 20.

**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

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a) WCJ is not exempt from having an administrative procedure to address inmate grievances regarding sexual abuse.

b, c, d, e, f, g) WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “There is no time limit on when an inmate may submit a report regarding an allegation of sexual abuse. Inmates are not required to use an informal report process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse. WCJ ensures that: An inmate who alleges sexual abuse may submit report without submitting it to a staff member who is the subject of the complaint. Such report is not referred to a staff member who is the subject of the complaint.
The Jail Administrator will issue a final decision on the merits of any portion or a report alleging sexual abuse within 90 days of the initial filing of the report. An extension to the normal reporting time period may exist if 90 days is not sufficient to make an appropriate decision. The Jail Administrator will notify the inmate of the extension and provide a date by which the decision will be made."

There have been zero grievances filed at WCJ regarding sexual abuse.

There have been zero emergency grievances filed at WCJ regarding sexual abuse.

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation.

The WCJ Inmate Handbook discusses the emergency grievance procedure at WCJ on page 19. This information covers how to file a grievance and how an inmate will not face adverse action filing a grievance.

**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)

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a, b, c) WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “WCJ inmates are provided with access to outside victim advocates for emotional support services related to sexual abuse through mailing addresses and telephone numbers, including toll-free hotline numbers to these organizations. Communication to these outside support services will be as confidential as possible in relation to security needs.

Staff will inform inmates, prior to giving them access to outside support services, 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.”

As of this date, WCJ has a verbal agreement in place with DVACK to provide services including emotional support services and crises counseling.

Most inmates interviewed state they are aware there is an outside service available to them. While they could not provide the Auditor the name of the provider, they were aware they can call the hotline number to get assistance.

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation.

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

**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**

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WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “WCJ will accept third-party reports of sexual abuse or sexual harassment on behalf of inmates. The process to make a third-party report is posted in our visitation, area outside the booking window, and will be given to all inmates so they can pass it along to family as well.”

During the tour of WCJ, the Auditor found a pamphlet title, “ PREA Information for Family and Friends,” located in Visitation. This pamphlet contains information on zero-tolerance, that all allegations will be investigated, medical and mental health referrals, how to recognize signs of sexual abuse and how to report sexual abuse and sexual harassment.

**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

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not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

a, e) WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “All WCJ staff are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it was a WCJ. Staff shall accept reports of sexual abuse and sexual harassment made; verbally, in writing, anonymously, and from third parties. Staff shall immediately notify the Jail Administrator or Sheriff if any verbal report of sexual abuse or sexual harassment against inmates or staff. Documentation of the inmate’s verbal report must be completed and turned into the Jail Administrator or Sheriff by the conclusion of the shift. All WCJ staff shall immediately report any staff neglect or violation of responsibility that may have contributed to an incident of sexual abuse or sexual harassment or retaliation.”

All staff interviewed state they are required to report any knowledge or suspicion of sexual abuse or sexual harassment. They report they must document all incidents and report it through the chain of command. They advise this begins with the PREA Coordinator and the Jail Administrator.

b) This same policy also states, “Staff may not reveal any information related to a sexual abuse report to anyone other than the extent necessary (Jail Administrator, Sheriff, or Undersheriff) to make treatment, investigation, and other security management decisions.”

All staff report confidentiality is important. They advise only those staff that “need to know” about the incident are told.

c) WCJ policy W-20.7 states, “Unless otherwise precluded by federal, state, or local law, medical and behavioral health practitioners shall report sexual abuse and inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of serves.”

WCJ does not employ full- and part-time medical or behavioral health personnel.

d) This same policy states “If the alleged victim is considered a vulnerable adult under state or local vulnerable persons’ statute, medical staff shall report the allegation to the Department of Human Services under applicable mandatory reporting laws.”

The PREA Coordinator reports WCJ does not house juveniles or those youth adjudicated as adults. He states they are only booked into the jail and them moved back up front away from the jail. Interviews with the Jail Administrator and other correctional officers supports this practice.

**Standard 115.62: Agency protection duties**

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

115.62 (a)

- 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

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When WCJ learns that an inmate is subject to an imminent danger of sexual abuse, staff are required to take immediate action.

WCJ has had zero incidents of inmates being in imminent danger of sexual abuse.

The Sheriff states, “We casually have them come out to the shoe to ask questions. We make sure it is unrelated to PREA to make them more comfortable. We find out what is going on, then we make alternate housing situation for the potential aggressor.”

All staff report it is important to separate the potential victim from the aggressor. All state they would document the information and immediately notify the PREA Coordinator and Jail Administrator for further instruction.

**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

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a, b, c, d) WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the PREA coordinator shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The WCJ PREA Coordinator will document such notification and maintain with yearly PREA reports/investigations. In the event that such a report is received by WCJ the Jail Administrator will ensure the allegation is investigated in accordance with the PREA investigation policy.”

WCJ has received zero allegations of sexual abuse from inmates confined at other facilities or from inmates in WCJ custody who have been at other facilities.

The Sheriff states, “We would call either the Sheriff, Undersheriff or their Jail Administrator.” He adds, “More than likely our Jail Administrator would contact their Jail Administrator based on the relationship they with him.”

**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

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a, b) WCJ policy W-20.8.5, “Prison Rape Elimination Act Coordinated Response,” dated December 28, 2015 states, “When any staff receives a report of an alleged assault or sexual harassment, that staff person is responsible to forward that report to his/her supervisor. The PREA Coordinator will ensure each and every allegation is investigated. Sexual Abuse: First Responders will separate the alleged victim from alleged abuser, notify shift supervisor/co-worker, preserve and protect the crime scene until steps can be taken to collect evidence, if alleged incident occurred in the past 12 hours, instruct the alleged victim to not take any action that may destroy evidence. This includes, showering, brushing teeth, changing clothes, urinating, defecating, eating, or drinking. This also applies to the alleged abuser. The shift supervisor/co-worker will notify the jail administrator and Sheriff of the incident. The Jail Administrator will notify the Washington County Sheriff if it hasn’t already been done. Ensure the crime scene is being preserved by a delegated officer. Ensure both the alleged victim and alleged abuser have an officer assigned to them. Notify medical staff of the alleged incident and utilize medical services provided for the alleged victim.”

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation. WCJ made an attempt to notify the alleged victim and was unsuccessful.
The Jail Administrator and PREA Coordinator both reported mental health services were offered to the victim and the victim was separated from the alleged staff perpetrator. The Sheriff reports the staff perpetrator was assigned alternate duties that allowed them to stay away from the victim pending the outcome of the investigation.

All staff report the victim and aggressor would be separated and all evidence preserved. They state this would include not allowing the victim or aggressor to drink water, change clothes or use the restroom. They also state they would then wait for the Sheriff or Undersheriff to arrive on scene and provide further instruction.

**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)*

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a) WCJ policy W-20.8.5, “Prison Rape Elimination Act Coordinated Response,” dated December 28, 2015 describes in detail approaches WCJ will take to prevent, detect, and respond to such conduct.

**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

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Washington County Sheriff’s Office and WCJ do not enter into any collective bargaining agreements.

The Sheriff advises the Washington County Sheriff’s Office has no collective bargaining agreements.

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

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

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- WCJ policy W-20.7, “Prison Rape Elimination Act Reporting Sexual Assault and Sexual Harassment Incidences,” dated December 28, 2015 states, “Inmates and staff who report sexual abuse or sexual harassment or cooperate with an investigation into sexual abuse or sexual harassment will be free from retaliation from other inmates or staff. It is the task of the Jail Administrator and Sheriff to protect inmates and staff from retaliation efforts of others.”

- The Sheriff advises if an inmate, who cooperates with an investigation, expresses fear of retaliation in their current housing situation, they would be moved to a new pod.

- This same policy also states, “Multiple protection factors will be available: inmate housing change, transfer of inmates (both abused and abuser), removal of alleged staff or inmate abusers from contact with alleged victims; emotional support services for inmates and staff that fear retaliation as a result of making a report or cooperating with an investigation.”

- The Sheriff states, “We separate the victim and perpetrator and makes sure they are in separate new pods. If I hear of any inkling of retaliation from staff, they will lose their job.”

- The Jail Administrator reports, “I check into see how they are doing and if we need to move them to a new pod. I have monthly meeting with them. I always initiate contact, especially when notifying them of the results of an investigation.”

- In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation.
There were no inmates housed in protective custody based on solely on their risk of sexual victimization on the day the Auditor was onsite. There has been no inmate housed in protective custody base on their risk of sexual victimization in the past 12 months.

c) WCJ policy W-20.7 states, “The Jail Administrator or designee will monitor the conduct and treatment of inmates and staff who reported sexual abuse or sexual harassment of inmates. This monitoring period will be no less than 90 days. Any suggestion of possible retaliation will be acted upon promptly and the monitoring stage will be extended. Conduct/treatment that may suggest retaliation against an inmate: inmate disciplinary reports, change of inmate housing and unfair, inconsistent practices regarding inmate rights/privileges/needs. Conduct/treatment that may suggest retaliation against a staff member: negative performance reviews and post assignment non consistent with practice.”

The Jail Administrator reports, “I would check to make sure, for example, their food was being taken by other inmates. I would monitor phone calls, check mail, etc. This would continue for the duration of their stay.”

d) This same policy also states, “Monitoring for retaliation will include a monthly status check with inmates. This check will be documented by the Jail Administrator.”

f) WCJ policy W-20.7 states, “Allegations of sexual abuse or sexual harassment that are unfounded will ultimately terminate WCJ’s responsibility to monitor for retaliation.”

**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**

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a) WCJ policy W-20.11, “Prison Rape Elimination Act Housing,” December 28, 2015 states, “Based on information gathered at the time of intake screening these results will drive the housing assignment of the inmates. Inmates that are considered at risk to victimized based on the responses recorded on the inmate PREA screening form will be placed in locations that are easily observable by staff members, have limited if any blind spots, and are not occupied by inmates that have a history of violence and/or sex-related crimes. The shift supervisor is responsible to make this housing assignment. Continual monitoring and assessing a housing assignment is completed an any indication that the risk of sexual misconduct is rising a new housing assignment will be ordered.

Use of Protective Custody: Involuntary placement into segregated housing is NOT permitted simply because an inmate is at high risk for victimization. The shift supervisor with the assistance of the Administrator and Sheriff will assess all available alternatives and segregated housing will only be issued if all alternatives are deemed inappropriate or pose a direct threat to the well-being of the inmate. In completing this assessment an inmate can be housed in protective custody for no longer than 24 hours.

If placed in protective custody on an involuntary basis WCJ staff will document the following: Basis of the facilities concern for inmates safety; Reason why no alternative means of separation can be arranged; Every 30 days a review will be completed on the inmate to determine if there is a continuing need for separation from the general population; and, Such assignment shall no ordinarily exceed 30 days as alternative means of separation likely can be arranged.

Inmates placed in protective custody for the above purpose shall have access to programs, privileges, and work opportunities to the extent possible. If there is restricted access the facility will document: The opportunities that have been limited; duration of the limitation, reasons for such limitations.

Assigning a transgender or intersex inmate: WCJ will consider each housing and programming assignment for a transgender or intersex inmate on a case-by-case basis always focused on inmate health and safety and whether placement would present a security issue; Serious consideration must be given to the inmate’s own views with respect to his/her own safety; Transgender and intersex inmates must be given the ability to shower separately from other inmates.”

One staff person was interviewed as it relates to supervising inmates in segregated housing. This staff person states, “If they are not in segregation due to discipline, then they have full access to everything.” The staff person also reports inmates are only placed in involuntary segregation only if necessary. If this is used, and if possible, they will only be in segregation only until the investigation is complete. The staff person also reports this placement is also reviewed every 30 days to determine if it can change.

There were no inmates housed in protective custody based on solely on their risk of sexual victimization on the day the Auditor was onsite. There has been no inmate housed in protective custody base on their risk of sexual victimization in the past 12 months.

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)

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Instructions for Overall Compliance Determination Narrative

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a) WCJ policy W-20.8, “Prison Rape Elimination Act Investigations: Criminal and Administrative, Referrals, Coordinated Response, Evidentiary Standard, Disciplinary Sanctions, and Reporting to Inmates,” dated December 28, 2015 states, “When WCJ conducts its own investigations into allegations of sexual abuse and sexual harassment, it will initiate a thorough and objective investigation for all allegations within 24 hours or as circumstances dictate, including third-part and anonymous reports.”

Both investigators report they have hours to initiate an investigation. “We have a time frame we have to comply with to start investigations.” When it comes to third party or anonymous reports, one of the investigators states, “It only different in that you consider the source. We still will always investigate.”

b) This same policy states, “Where sexual abuse is alleged, WCJ shall utilize investigators who have received specialized training in sexual abuse investigations pursuant to 115.34.”

Both investigators report they have taken specialized training through NIC on sexual abuse investigation in a confinement setting. One of investigators states, “It was a lot more specific and careful when it came to interviews and evidence preservation.” Both investigators report the NIC training also covered proper use of Miranda and Garrity warning and criteria and evidence required to substantiate a case for administrative or prosecution referral.

c) WCJ policy W-20.8 states, “Investigator shall: Gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and available electronic data; Interview alleged victims’; Interview suspected perpetrators; Interview witnesses; Review prior complaints and reports of sexual abuse involving the alleged perpetrator.”

Investigators report they would get the basics first – who, what, when, and where. They would then conduct interviews, do camera reviews, collect any physical evidence, make sure a forensic exam was order if it was needed and then prepare their report.

d) This same policy also states, “When the quality of evidence appears to support criminal prosecution, WCJ will cease any administrative investigation while the criminal investigation is being conducted.”

Both investigators state no, they would not compel an interview. They state they will only confer with the county attorney when needed.

e) WCJ policy W- 20.8 states, “The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by person’s status as an inmate or staff. WCJ will not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.”

Both investigators report they must treat all victims, suspects and witnesses as credible until proven otherwise. When asked about using polygraphs, both report it is not used.

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation.

f) This same policy also states, “Administrative investigations must include an effort to determine whether staff actions or failures to act contributed to the abuse; and must be documented in written reports that include the description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.”
Both investigators report they use camera footage on all administrative investigations. They also report they would document as much as possible in their report.

g) WCJ policy W-20.8 states, “Criminal investigations must be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.”

Both investigators report criminal investigations are documented.

h) This same policy also states, “Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.”

Washington County Sheriff’s Office reports they refer cases to the county attorney “Once we feel the evidence and probable cause has been met.”

i) WCJ policy W-20.8 states, “WCJ shall retain all administrative and criminal written reports referenced for as long as the alleged abuser is incarcerated or employed by the agency, plus 5 years.”

j) This same policy states, “Investigations are completed regardless of employee status or inmate custody status.”

Investigators report the allegation would still be investigated and completed; even if staff and/or victim leave.

l) WCJ policy W-20.8 states, “When Washington County Sheriff’s Office investigates sexual abuse, WCJ staff shall cooperate with outside investigators and shall remain informed about the progress of the investigation.”

The PREA Coordinator reports every allegation is handled inhouse. He also states staff would cooperate if a time comes when an outside agency is called in to investigate sexual abuse.

Investigators report the only time an outside agency would come in to conduct an investigation is if the perpetrator was either the Sheriff or Undersheriff.

### 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*)
Meeting 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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the final report, accompanied by information on specific corrective actions taken by the facility.

Washington County Sheriff’s Office conducts all criminal and administrative investigations into any allegation of sexual abuse or sexual harassment.

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

- 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 employed at 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 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

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

a) WCJ policy W-20.8, “Prison Rape Elimination Act Investigations: Criminal and Administrative, Referrals, Coordinated Response, Evidentiary Standard, Disciplinary Sanctions and Reporting to Inmates,” December 28, 2015 states, “Following an investigation, the PREA Coordinator or designee will inform the inmate or inmates verbally whether the allegation has been determined to be
substantiated, unsubstantiated, or unfounded. The PREA Coordinator will deliver in person a statement of findings which will require the signature of the inmate(s). If the inmate(s) refuse to sign the findings form, the PREA Coordinator will document the refusal and have a staff member witness and sign the refusal.”

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation. WCJ made an attempt to notify the alleged victim and was unsuccessful.

Investigative Staff Q 20 Both investigators report all notifications to inmates is done in writing.

b) NA Washington County Sheriff’s Office is responsible for conducting all administrative and criminal investigations of sexual abuse and sexual harassment at WCJ.

c) This same policy also states, “If there has been a substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against an inmate, the agency must subsequently inform the inmate whenever: The staff member is no longer posted within the inmate’s unit; The staff member is no longer employed at the facility; and, WCJ learns that the staff member has been charged or convicted on a charge related to sexual abuse within the facility.”

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation. WCJ made an attempt to notify the alleged victim and was unsuccessful.

d) WCJ W-20.8 states, “Following an inmate’s allegation that he or she has been sexually abused by another inmate while at WCJ, WCJ will subsequently inform the alleged victim whenever: WCJ learns that the alleged abuse has been indicted or convicted on a charge related to sexual abuse within a facility.”

There have been no reports of inmate on inmate sexual abuse or sexual harassment since the date of their last PREA audit in 2016.

e) This same policy states, “All notifications or attempted of the final determination of an allegation is documented and stored by the PREA Coordinator.”

In the past 12 months, Washington County Sheriff’s Office has one allegation of staff on inmate sexual abuse (voyeurism). This investigation was completed and was determined to be unfounded. The alleged victim was no longer in custody as the completion of the investigation. WCJ made an attempt to notify the alleged victim and was unsuccessful.

**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

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

WCJ has disciplined zero staff for violating WCJ policies regarding sexual abuse or sexual harassment of inmates in their custody.

a, b, d) WCJ policy W-20.5, “Prison Rape Elimination Act Employee and Volunteer Training and Discipline,” dated December 28, 2015 states, “A WCJ staff member that is found to have violated WCJ policy on sexual abuse or sexual harassment is subject to disciplinary sanctions up to and including terminations. Any WCJ staff member that has engaged in sexual abuse of an inmate will be
terminated. When a WCJ staff member is terminated as a result of violating sexual abuse or sexual harassment policies; this shall be reported to the Washington County Sheriff’s Office, unless the activity was clearly not criminal. Relevant licensing bodies (i.e. board of Nursing, Board of Addiction Counselors Examiners) will be notified of any sexual abuse or sexual harassment policy violations by WCJ staff members that may possess a professional license.”

c) This same policy also states, “Disciplinary sanctions for violations of WCJ policies regarding sexual abuse or sexual harassment (other than actually engaging in sexual abuse) must be comparable with the nature and circumstances of the acts committed, the staff member’s disciplinary history, sanctions imposed for comparable offenses by other staff with similar histories.”

### 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

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.
WCJ policy W-20.5, “Prison Rape Elimination Act Employee and Volunteer Training and Discipline,” dated December 28, 2015 states, “Any contractor or volunteer who engages in sexual abuse will immediately be removed from the approved volunteer/contractor list and will never by reconsidered at WCJ in the future. They will be prohibited immediately from contact with inmates. If the case is criminal in nature it will be reported to the Washington County Sheriff’s Department. Relevant licensing bodies will be notified of the policy violation also.”

There have been no contractors or volunteers disciplined for engaging in sexual abuse of inmates in the custody of WCJ.

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

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There have been zero allegation of inmate on inmate sexual abuse or sexual harassment at WCJ since the last PREA audit in 2016.

a, b, c, e, f) WCJ policy W-20.8, “Prison Rape Elimination Act Investigations: Criminal and Administrative, Referrals, Coordinated Response, Evidentiary Standard, Disciplinary Sanctions and Reporting to Inmates,” dated December 28, 2015 states, “WCJ will impose sanctions pursuant to WCJ disciplinary processes to inmates found guilty of engaging in inmate-on-inmate sexual abuse. Sanctions will 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. WCJ may discipline an inmate for sexual contact with staff only upon finding the staff member did not consent to the contact. Reports made in good faith may not constitute falsely reporting an incident or ling, even if the investigation does not establish evidence sufficient to substantiate the allegation.”

d) WCJ does not offer therapy or other interventions designed to address and correct underlying reasons or motivations for those inmates who engage in sexual abuse.

WCJ does not employ full or part time medical or mental health staff.

g) WCJ prohibits all forms of sexual contact between inmates. Inmates are notified of this fact through the WCJ Inmate Handbook, page 20 and in the WCJ “Zero-Tolerance” pamphlet all inmates receive during inmate education. This pamphlet states, “Zero-tolerance of consensual acts of sex between inmates is against facility rules and you will be disciplined.”
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)

Instructions for Overall Compliance Determination Narrative

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a, c, d, e) WCJ Policy W-20.9, “Prison Rape Elimination Act Medical and Mental Health Care,” dated December 28, 2015 states, “If the screening indicates an inmate has experience sexual victimization or perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is offered a follow-up meeting with a medical or behavioral health practitioner within 14 days of the intake screening. Disclosure of information related to sexual victimization or abuse that occurred in an institution setting must be strictly limited to staff, as necessary, to make security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as required by federal, state, or local law. Medical and behavioral health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institution setting.”

During the onsite portion of this audit, only one inmate reported sexual abuse during the PREA Risk Screening. The inmate reports, “They sat down and spoke with me. They made a referral to mental health that day. I can contact mental health whenever I need to speak, or I can talk with jail staff. In fact, I am getting another evaluation next week.”

Staff who conduct the risk screen support this practice. Both report mental health is contacted immediately.

WCJ does not employ full or part time medical or mental health staff. They receive services from a community mental health provider that serves multiple counties. The local hospital provides medical services.

b) NA WCJ is not a prison.

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

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a, b, c, d) WCJ Policy W-20.9, “Prison Rape Elimination Act Medical and Mental Health Care,” dated December 28, 2015 states, “Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crises intervention services, the nature and scope determined by medical and behavioral health practitioners according to their professional judgement. If no qualified medical or mental health practitioners are on duty at the time a report or recent abuse is made, first responders will take preliminary steps to protect the victim and will immediately notify the appropriate medical and mental health practitioner. Inmate victims of sexual abuse while incarcerated shall be 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. Medical and behavioral health services shall be provided to the victim and abuser without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”
WCJ does not employ full or part time medical or mental health staff. They receive services from a community mental health provider that serves multiple counties. Medical services are provided by the local hospital.

WCJ had one allegation of staff on inmate sexual abuse (voyeurism). The victim was offered and declined medical and mental health services.

**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

<table>
<thead>
<tr>
<th>115.83 (a)</th>
<th>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</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.83 (b)</td>
<td>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</td>
</tr>
<tr>
<td>115.83 (c)</td>
<td>Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No</td>
</tr>
<tr>
<td>115.83 (d)</td>
<td>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</td>
</tr>
<tr>
<td>115.83 (e)</td>
<td>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</td>
</tr>
<tr>
<td>115.83 (f)</td>
<td>Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No</td>
</tr>
</tbody>
</table>
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

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a, b, c) WCJ Policy W-20.9, “Prison Rape Elimination Act Medical and Mental Health Care,” dated December 28, 2015 states, “WCJ will offer medical and behavioral health evaluation and, as appropriate, treatment to all inmates that have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will 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.”

WCJ does not employ full or part time medical or mental health staff. They receive services from a community mental health provider that serves multiple counties. Medical services are provided by the local hospital.

WCJ had one allegation of staff on inmate sexual abuse (voyeurism). The victim was offered and declined medical and mental health services.

d, e) This same policy states, “Inmate victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests. If pregnancy results from conduct in (D) above, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.”
WCJ does not employ full or part time medical or mental health staff. They receive services from a community mental health provider that serves multiple counties. Medical services are provided by the local hospital.

WCJ had one allegation of staff on inmate sexual abuse (voyeurism). The victim was offered and declined medical and mental health services.

f, g) WCJ policy W-20.9 states, “Inmate victims of sexual abuse while incarcerate will be offered tests for sexually transmitted infections as medically appropriate. Treatment services will 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.”

WCJ had one allegation of staff on inmate sexual abuse (voyeurism). The victim was offered and declined medical and mental health services.

**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

115.86 (a)

- 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

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- 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

- 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

- 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
- 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**

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

a, b, c, d, e) WCJ policy W-20.10, “Prison Rape Elimination Act Sexual Abuse Incident Reviews,” dated December 28, 2015 states, “Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility; 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; and prepare a report of its findings, including but not necessarily limited to determinations made pursuant to items (1-5) of this section, and any recommendations for improvement and submit such report the Sheriff and Jail Administrator. WCJ shall implement the recommendations for improvement or shall document its reason for not doing so.”

A member of the Incident Review Team reports, “We take everything into consideration. We would always examine the area in which the incident happened as it is part of the investigation. We look at staffing levels and cameras; especially if there are concerns of blind spots.”
WCJ only had one allegation of staff on inmate sexual abuse (voyeurism) occur in the past year. A incident review was conducted and met all the requirements of this standard.

**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**

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

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*
Instructions for Overall Compliance Determination Narrative

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

a, b, c, d) WCJ policy W-20.12, “Prison Rape Elimination Act Data Collection, Review and Retention,” dated December 28, 2015 states “WCJ shall collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. WCJ utilizes the KBI, and an evident custody receipt for any data or evidence collected. The WCJ PREA coordinator shall aggregate the incident-based sexual abuse data at least annually. WCJ shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation file, and sexual abuse incident reviews. All completed PREA investigations will be maintained by the PREA Coordinator. Electronic copies are secure by an encrypted network folder and paper documents will be kept in a locked file cabinet in the Sheriff's Office"

e) NA WCJ does not contact for the confinement of its inmates.

f) NA DOJ has not requested agency data.

The PREA Coordinator reports an annual report has not been prepared as there has not been enough data to create one.

RECOMMENDATION: It is recommended WCJ create a formalized report showing what little data they have accumulated. Even if the information gathered results in many years of zero allegations, it’s important to demonstrate compliance with this standard through the publishing of this report. This information can then be posted on your Facebook page for the public to review.

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

a, b, c, d) WCJ policy W-20.12, “Prison Rape Elimination Act Data Collection, Review and Retention,” dated December 28, 2015 states, “The PREA Coordinator, Jail Administrator, Sheriff and Undersheriff will review data collected and aggregated pursuant to PREA 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detention, and response policies, practices, and training to include: identifying problem areas, taking corrective action on an on-going basis, and preparing the annual report of its findings and corrective actions for each facility and the agency as a whole. The report must include a comparison of the current year’s data and corrective actions with those from the prior years and provide and assessment of the agency’s progress in addressing sexual abuse. Redaction of specific material may take place when publication presents a clear and specific threat to the safety and security of the facility but will indicate the nature of the material redacted."

The Sheriff states, “I do. It gives you a heads up, almost predictive information, on what could happen.” He adds he would approve any annual report prepared by the PREA Coordinator.

The PREA Coordinator reports he reviews all data and keeps a file with everything that has happened. He states they have not prepared an annual report as they do not have enough information to create a
He states there has only been one allegation in past the three years and it was unfounded. He also adds if they were to create a report, no personnel identifiers would be included.

**RECOMMENDATION:** It is recommended WCJ create a formalized report showing what little data they have accumulated. Even if the information gathered results in many years of zero allegations, it’s important to demonstrate compliance with this standard through the publishing of this report. This information can then be posted on your Facebook page for the public to review.

### 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**

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

a, b, c, d) WCJ policy W-20.12, “Prison Rape Elimination Act Data Collection, Review and Retention,” dated December 28, 2015 states, “WCJ ensures that data collected pursuant to 115.87 are securely retained by the Jail Administrator. All personal identifiers will be removed prior to making data available publicly. Sexual abuse data collected pursuant 115.87 will be maintained for a period of no less than 10 years after the date of initial collection, unless federal, state or local law states otherwise. All case records associated with claims of sexual abuse, including incident reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations will be maintained in accordance with state laws.”

**RECOMMENDATION:** It is recommended WCJ create a formalized report showing what little data they have accumulated. Even if the information gathered results in many years of zero allegations, it’s important to demonstrate compliance with this standard through the publishing of this report. This information can then be posted on your Facebook page for the public to review.

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### 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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

a) NA Washington County Sheriff’s Office only operates one facility: WCJ.

b) This is the second year of the current audit cycle and the second PREA audit for WCJ. WCJ’s first audit was conducted in 2016.

h) The Auditor had complete access to all records and was able to observe all areas of WCJ.

i) The Auditor received copies of all relevant documentation prior to the onsite portion of this audit and while onsite.

m) The Auditor was able to conduct interviews of staff and inmates in a private, comfortable setting. This allowed for the confidentiality needed to complete and accurate audit.
n) A notice of audit was posted in all areas staff and inmates gathered. This notice contained the Auditor’s address and outlined the confidentiality requirements. The Auditor received zero letters relating to this audit.

**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 have 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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Washington County Sheriff’s Office PREA Audit reports will be made available on the county website which is located at [http://www.washingtoncountyks.gov/county-departments/sheriff/](http://www.washingtoncountyks.gov/county-departments/sheriff/).
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. Auditors are not permitted to submit audit reports that have been scanned. See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

/s/ Elisabeth Copeland  October 5, 2019
Auditor Signature  Date

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