

PREA Facility Audit Report: Final

Name of Facility: Solano County Claybank Detention Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 11/24/2024

Date Final Report Submitted: 01/26/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Eric Woodford	Date of Signature: 01/26/2025

AUDITOR INFORMATION	
Auditor name:	Woodford, Eric
Email:	eiw@comcast.net
Start Date of On-Site Audit:	10/07/2024
End Date of On-Site Audit:	10/11/2024

FACILITY INFORMATION	
Facility name:	Solano County Claybank Detention Facility
Facility physical address:	2500 Claybank Road, Fairfield, California - 94533
Facility mailing address:	530 Union Avenue, Suite 100, Fairfiled, California - 94533

Primary Contact

Name:	Daniel Schick
Email Address:	DRSchick@solanocounty.com
Telephone Number:	707-784-7085

Warden/Jail Administrator/Sheriff/Director	
Name:	Thomas A. Ferrara
Email Address:	TFerrara@solanocounty.com
Telephone Number:	7077847030

Facility PREA Compliance Manager	
Name:	Steve Clemente
Email Address:	seclemente@solanocounty.com
Telephone Number:	7077847515

Facility Health Service Administrator On-site	
Name:	Darlla Roesle
Email Address:	DARoesler@solanocounty.com
Telephone Number:	7077847130

Facility Characteristics	
Designed facility capacity:	397
Current population of facility:	96
Average daily population for the past 12 months:	91
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both womens/girls and mens/boys

<p>Which population(s) does the facility hold? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)</p>	
<p>Age range of population:</p>	18-70
<p>Facility security levels/inmate custody levels:</p>	Adsep, GenSep, Inmate Worker, Min, Medium and PC
<p>Does the facility hold youthful inmates?</p>	No
<p>Number of staff currently employed at the facility who may have contact with inmates:</p>	271
<p>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</p>	21
<p>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</p>	18

AGENCY INFORMATION	
Name of agency:	Solano County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	530 Union Avenue, Suite 100, Fairfield, California - 94533
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	

Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Daniel Schick	Email Address:	DRschick@solanocounty.com

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-10-07
2. End date of the onsite portion of the audit:	2024-10-11

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Correspondence with Senior Operations Officer of Just Detention International on 6/28/24 who indicated that in a review of the Just Detention Database indicated that the Agency had not received any information regarding the Claybank Facility or Solano CJ.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	397
15. Average daily population for the past 12 months:	91
16. Number of inmate/resident/detainee housing units:	96
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

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

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	96
19. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
21. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
22. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
23. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	11
24. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1

<p>25. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>26. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>27. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>28. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>Agency stated to auditor that as of 9/18/24, the classification unit has not assigned anyone with a disability to Claybank Detention Facility. On first day of PREA Audit, the agency indicated they had no inmates with disabilities assigned to Claybank Detention Facility.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>30. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>271</p>
<p>31. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>5</p>

<p>32. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>21</p>
<p>33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No additional comments to add.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>14</p>
<p>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Based on race and gender</p>
<p>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

38. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Small population in Claybank Facility (91). A number of IPs were released during the onsite audit and auditor had to select IPs to replace those who were released during that week. Auditor oversampled Random IPs (11 females to 2 males)
Targeted Inmate/Resident/Detainee Interviews	
39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	5
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
41. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
42. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>42. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>42. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Agency reports no disabled inmates housed at Claybank Detention Facility</p>
<p>43. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>43. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>43. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Agency reports no disabled inmates housed at Claybank Detention Facility</p>
<p>44. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>

<p>45. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>46. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>46. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>46. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No transgender or intersex inmates housed at Claybank</p>
<p>47. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>47. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>47. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>1 inmate who reported sexual abuse housed at Claybank but was released prior to the Onsite Audit</p>
<p>48. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No inmates are housed in Segregated Housing for Risk of Sexual Victimization</p>

<p>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No additional comments to provide.</p>
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>51. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>9</p>
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<p>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </p>
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<p>If "Other," describe:</p>	<p>Gender and Race considered as characteristics for selection</p>
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<p>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>
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<p>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Due to limited number of staff working day and night shift, the maximum number of random staff who could be interviewed with available random staff was 12.</p>
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Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

<p>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>35</p>
<p>56. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>58. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>59. Were you able to interview the PREA Compliance Manager?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

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

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

	<input type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	IT staff Inmate Mail Staff Training Staff Grievance Response Staff Kitchen Staff Hearing/Disciplinary Staff Volunteer/Contractor Coordinator Maintenance Staff
61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Enter the total number of VOLUNTEERS who were interviewed:	2
61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input checked="" type="checkbox"/> Other
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
62. Enter the total number of CONTRACTORS who were interviewed:	2

<p>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input checked="" type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input checked="" type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
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<p>63. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No additional comments to provide.</p>
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<p>64. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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Was the site review an active, inquiring process that included the following:

<p>65. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>66. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>68. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>Auditor was provided access throughout the facility during the onsite audit and conducted the required critical functions during the onsite audit. Formal conversations were conducted in confidential settings for both IPs and staff to ensure private responses to interview questions or any private reporting staff or inmates may wish to provide.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>70. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>All document sampling was randomly selected by auditor from staff and IP rosters except for sexual abuse and sexual harassment investigations which were investigated over the 12 months preceding the onsite audit.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	X	X	X	X
Staff-on-inmate sexual abuse	X	X	X	X
Total	X	X	X	X

72. Explain why this information could not be provided.

During the 12 months preceding the audit there were no sexual abuse investigations conducted and, therefore, no sexual abuse investigation outcomes.

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	X	2	X
Staff-on-inmate sexual harassment	X	X	X	X
Total	2	X	2	X

73. Explain why this information could not be provided.

During the 12 months preceding the audit there were only 2 sexual harassment investigations conducted. Staff on inmate sexual harassment did not occur during the 12 months preceding the audit.

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

74. Explain why this information could not be provided.

During the 12 months preceding the audit there were no sexual abuse investigations conducted and, therefore, no investigation outcomes.

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	X	X	X	X
Staff-on-inmate sexual abuse	X	X	X	X
Total	X	X	X	X

75. Explain why this information could not be provided.

During the 12 months preceding the audit there were no sexual abuse investigation conducted and, therefore, no investigations outcomes.

Sexual Harassment Investigation Outcomes

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

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

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

76. Explain why this information could not be provided.

During the 12 months preceding the audit there were no criminal sexual harassment investigations conducted.

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	X	2	X	X
Staff-on-inmate sexual harassment	X	X	X	X
Total	X	2	X	X

77. Explain why this information could not be provided.

During the 12 months preceding the audit only 2 sexual harassment investigations occurred prior to the date of the onsite audit, both investigations were Inmate on Inmate in nature and determined to be unfounded.

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

78. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	0
78. Explain why you were unable to review any sexual abuse investigation files:	Agency reported there were no sexual abuse investigations conducted in the 12 months prior to the onsite audit.
79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files	
83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2

<p>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No additional comments to provide</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

95. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
- No

Non-certified Support Staff

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

- Yes
- No

AUDITING ARRANGEMENTS AND COMPENSATION

97. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11(a): PREA Policy 606 mandates zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all inmates from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment. This policy provides guidance for complying with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect, and respond to sexual abuse, harassment, and retaliation against inmates in the Solano County Sheriffs Office Detention Facilities to include definitions related to the Policy such as Intersex, Sexual Abuse, Sexual Harassment Transgender and Voyeurism.</p> <p>Policy section 606.10 Sexual Abuse and Sexual Harassment includes sanctions for those found to have participated in prohibited behaviors and includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.</p> <p>115.11(b): PREA Policy 606.4 PREA Coordinator mandates that the Sheriff or</p>

	<p>designee shall appoint an upper-level manager with sufficient time and authority to develop, implement, and oversee office efforts to comply with PREA standards. The PREA coordinator shall review facility policies and practices, and make appropriate compliance recommendations to the Facility Commander. Agency provided auditor with copy of the Solano Sheriff Org Chart FY24-25 which identifies a Sheriff's Lieutenant as the PREA Coordinator who is designated at an upper-level, agency-wide placed in 3rd leadership position under the Sheriff.</p> <p>Interview with the PREA Coordinator indicates that he has enough time to manage all of his PREA responsibilities, There are 3 PREA Compliance Manager throughout the agency's facilities and he woks with the PREA Manager to work with Policy , PREA guidelines or State law when working toward compliance with any PREA Standard.</p> <p>115.11(c): PREA Policy Org Chart identifies Facility Commanders designated as PREA Compliance Managers. PREA Compliance Managers report to the Custody Captain. Interview with the PREA Compliance Manager indicates that she has enough time to manage all of her PREA related responsibilities.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.11.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12(a): N/A - Agency reports they have not entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>115.12(b): N/A - agency does not contract with private agencies or other entities for the confinement of inmates.</p> <p>Interview with Contract Administrator indicates that Agency does not possess any renewed contracts for the confinement services, however, if they did, the Contract Administrator would include appropriate language to ensure PREA compliance.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.12.</p>

115.13	Supervision and monitoring
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Auditor Overall Determination: Meets Standard

Auditor Discussion

115.13(a): Agency has uploaded the 2024 PREA Staffing Plan for the Claybank Detention Facility. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates on which the staffing plan was predicated is 91. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates on which the staffing plan was predicated is 96.

Interview with Facility Commander or Designee indicates that the Facility has a staffing plan dated 2023 that provides adequate levels to protect and makes against sexual abuse. Video monitoring is part of the plan and the staffing. Plan is documented. Staffing plan considerations as outlined in Standard provision 115.13 items 1 thru 11 were all taken into consideration when creating the last Staffing Plan in 2023 in. Agency is currently bidding for new cameras which can see both ways towards the Officer's Station in each housing unit. Agency checks for compliance with the Staffing Plan buy following PREA Guidelines.

Interview with the PREA Compliance Manager indicates that Staffing plan considerations as outlined in Standard provision 115.13 items 1 thru 11 were all taken into consideration when creating the 2023 Staffing Plan

SUPERVISION PRACTICES:

During the site review, auditor observed staffing during the 12 hour shifts per day (0700 to 1700 hours and 1700 hours to 0700 hours). Each shift has at least one correctional sergeant supervising up to eight -line staff. Allocated staff for the Claybank facility is - one Facility Commander, four Sergeants, thirty eight correctional officers. There 7 officers and one sergeant on duty for day shift with one officer assigned to each housing unit.

There are 6 officers and one sergeant on duty for grave shift with one officer assigned to each section. In addition, there is one roving officer and one control officer assigned to the facility on rave shift. There are 4 other correctional officer support positions at the facility. During the onsite audit Claybank Facility population housed only 91 inmates.

In review of housing units, auditor observed cross-gender viewing during toileting in Modules L, O and P which were not utilized during the onsite audit, but auditor identified the non-compliant issues in Standard provision 115.15(d) and in the Issue Log#1 for Corrective Action.

115.13(b): N/A - Agency states no deviations from the staffing plan in the past 12 months

Interview with Facility Commander or Designee indicates that the Facility has a staffing plan dated 2023 that provides adequate levels to protect and makes against sexual abuse. Video monitoring is part of the plan and the staffing. Plan is documented. Staffing plan considerations as outlined in Standard provision 115.13 items 1 thru 11 were all taken into consideration when creating the last Staffing Plan in 2023.

115.13(c): PAQ indicates that at least once every year the facility/agency, in

collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

Interview with the PREA Coordinator indicates that he is consulted regarding any assessments of, or adjustments to, the staffing plan for the Claybank facility. The assessments occur at least annually.

At least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

Agency to provide auditor with annual staffing plan review documentation per Standard provision 115.13(c).

Agency to upload annual staffing plan reviews to the Supplemental File.

115.13(d): PREA POLICY 606.4(m) mandates that a protocol requiring mid-level or higher-level supervisors to conduct and document unannounced inspections to identify and deter sexual abuse and sexual harassment conducted over all shifts. The protocol shall prohibit announcing when such inspections are to occur, unless it is necessary for operational considerations.

Interview with Intermediate- or Higher-Level Facility Staff indicates that he has conducted and documented unannounced rounds in the PREA Link Rounds for Sergeants which is uploaded to the PREA Sharepoint for security.

The current audit is being conducted on the Claybank Facility. Unannounced rounds verification provided in the PRE-Audit questionnaire included entries for all 3 Solano County Jail facilities, and failed to verify that rounds are conducted for each shift per the PREA Standard. Agency to collect Unannounced Round data for each shift which occurs bi-weekly between 11/3/24 to 1/5/25

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.13(c), 115.13(d) and corrective action is required.

Corrective Action Recommended:

115.13(c): At least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

1. Agency to provide auditor with annual staffing plan review documentation per

	<p>Standard provision 115.13(c).</p> <p>2. Agency to upload annual staffing plan reviews to the Supplemental File.</p> <p>115.13(d): The current audit is being conducted on the Claybank Facility. Unannounced rounds verification provided in the PRE-Audit questionnaire included entries for all 3 Solano County Jail facilities, and failed to verify that rounds are conducted for each shift per the PREA Standard.</p> <p>1. Agency to collect Unannounced Round data for each shift which occurs bi-weekly between 11/3/24 to 1/5/25</p> <p><u>Corrective Action Completion 12/18/24 :</u></p> <p>115.13(c): 11/25/24 - Agency uploaded the Claybank Detention Facility PREA Staffing Plan March 1, 2022 and Claybank Detention Facility PREA Staffing Plan February 28, 2023 to the Supplemental File. Both Staffing Plans are in compliance with Standard provision 115.13(c).</p> <p>115.13(d): 12/18/24, Agency provided auditor with unannounced rounds excel spreadsheet which verifies rounds conducted throughout the facility during both day and night shifts by intermediate-level staff between 11/1/2024 and 12/17/2024. The spreadsheet included reviews of grievance lock-boxes in housing units and visits to the kitchen, facility grounds, property room, tower, medical, intake, booking etc.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.13(c), 115.13(d) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.13.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14(a): N/A - Agency reports that youthful inmates under 18 years of age are not housed in adult detention facilities.
	115.14(b): N/A - Agency reports that youthful inmates under 18 years of age are not housed in adult detention facilities.

	<p>115.14(c): N/A - Facility does not have youthful inmates less than 18 years old.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.14.</p>
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115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.15(a): Policy 518 Searches mandates that Unless conducted by a qualified health care professional a strip search shall be conducted by staff members of the same sex as the person being searched (Penal Code § 4030). Cross-gender strip searches are prohibited.</p> <p>(a) No person shall be subjected to a physical body cavity search without the approval of the Facility Commander or the authorized designee and only with the issuance of a search warrant. A copy of any search warrant and the results of the physical body cavity search shall be included with the related reports and made available, upon request, to the inmate or authorized representative (except for those portions of the warrant ordered sealed by a court).</p> <p>(b) Custody staff shall refuse to accept and book an arrestee from the arresting agency if the arrestee requires a physical body cavity search and that search has not been conducted.</p> <p>(c) Only a physician may conduct a physical body cavity search. Except in exigent circumstances, only a physician who is not responsible for providing ongoing care to the inmate may conduct the search (15 CCR 1206(0)).</p> <p>(d) Except for the physician conducting the search, persons present should be of the same sex as the person being searched. Only the necessary staff needed to maintain the safety and security of the medical personnel shall be present (Penal Code § 4030).</p> <p>(e) Privacy requirements, including restricted touching of body parts and sanitary condition requirements are the same as required for a strip search.</p> <p>(f) All such searches shall be documented.</p> <p>There are no logs of cross-gender strip search and cross gender visual body cavity searches.</p> <p>Agency reports that In the past 12 months, there have been no cross-gender strip or cross-gender visual body cavity searches of inmates. Nor any existing logs documenting said searches.</p> <p>Interview of Non-medical staff (involved in cross-gender strip or visual searches) indicate that urgent circumstances that would require cross-gender strip searches and visual body cavity searches would be emergency evacuation, fire and earthquake emergencies where time of the essence in finding weapons.</p>

115.15(b): Policy 518 PREA Section 518.3 mandates that except in exigent circumstances, male staff may not pat down female inmates and female staff may not pat down male inmates. Absent the availability of a same sex staff member, it is recommended that a witnessing staff member be present during any pat-down search of an individual of the opposite sex. All cross-gender pat-down searches shall be documented in the Jail Management System (JMS) outlining the exigency. Documentation shall be forwarded to the Facility Commander and the PREA Coordinator. Under no circumstances shall male custody staff perform non-emergency clothed body searches of female inmates. Agency reports that the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. Over the past 12 months, the facility reports that no pat-down searches of female inmates that were conducted by male staff.

Interview with Random Sample of Staff indicates that If female staff are not available to conduct pat-down searches of female inmates, the jail does not restrict those inmates' access to programs or out of cell opportunities.

Inmate Interview Questionnaire (10 Female inmates) indicates that inmate has not been unable to participate in activities outside of their cell because female staff was unavailable to conduct pat-down searches.

115.15(c): PREA Policy 518 Strip Searches mandates that all such searches shall be documented for physical body cavity searches and cross gender strip and pat-down searches. Agency reports that in the past 12 months, there have been no cross-gender strip or cross-gender visual body cavity searches of inmates.

115.15(d): Custody Procedure Policy Section Opposite Gender Housing and Supervision mandates that Supervision of Opposite Gender Inmates:

1. Custody staff shall limit one-on-one contact with inmates of the opposite gender, especially in unmonitored areas of the jail.
2. The presence of opposite gender staff or visitors in all housing units shall be announced to the inmates, prior to staff entry. The announcement will provide appropriate warning to inmates who may be changing clothing or using the toilet. These announcements shall consist of "male on the floor" in a female housing module or unit and "female on the floor" in a male housing module or unit.
3. The presence of opposite gender staff or visitors in areas where inmates may be strip searched and/or dressed in and/or out, such as the safety cell, intake area or inmate release area, shall be announced to the inmates, prior to staff entry.
4. Custody staff shall not enter the shower and toilet areas, living spaces or cells of opposite gender inmates, except in exigent or emergency circumstance, and/or when accompanied by a staff member who is the same gender as the inmate.
5. Custody staff may perform observation log checks on inmates of the opposite gender; however, the previously mentioned announcement must be made.

Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit per Announcement Procedure 3.013. An announcement sign is posted at each housing unit entry door to remind all staff to announce their presence upon entering an inmate housing unit of the opposite gender.

Inmate Interview Questionnaire indicates that inmates interviewed indicate that male and female staff announce their presence when entering a cross-gender housing unit and are not naked in the presence of cross-gender staff.

Interview with Random Sample of Staff indicates that officers announce their presence when entering a housing unit of the opposite gender. Announcement is "Male or Female in the Mod or On the Floor"

CROSS-GENDER VIEWING:

During the Onsite Audit, auditor observed toilet and urinal viewing from outside the housing Mod for L, O and P Mods which is non-compliant with the PREA Standards.

Agency was informed during the closeout briefing and will work to correct the cross-gender viewing opportunities.

1. Agency to correct the cross-gender viewing opportunities presented in Modules L, O & P and provide auditor with verification of compliance via Photos or onsite auditor review verification with /standard 115.15(d) through the Supplemental File.

115.15(e): Policy 518.5 Transgender and Intersex Searches mandates that searches of transgender and intersex inmates shall be conducted in a professional and respectful manner, and in the least intrusive manner possible consistent with security needs.

Staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining genital status (see Prison Rape Elimination Act Policy for transgender and intersex definitions). If genital status is unknown, it may be determined during conversations with the inmate or by reviewing arrest history, available databases, available medical records or, if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional.

Transgender and Intersex inmates will be given the opportunity to choose the gender of custody staff performing the pat search. However, the supervisor shall make the final decision as to who will perform the pat search. This decision shall be based upon all factors related to the expressed interest of the inmate, availability of staff, and the overall safety of all parties involved. These searches shall be documented in inmate's record and notification made to the Facility Commander, PREA Coordinator and PREA Manager. Such searches have not occurred in the past 12 months.

Interview with Random Sample of Staff indicates that they are aware of the policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the purpose of determining that inmate's genital status.

No Transgender or Intersex inmates housed at the Claybank Facility during the Onsite Audit. No Transgender or Intersex inmates were interviewed.

115.15(f): Agency provided PREA Pat Search Training Final, Guidance on cross-gender and transgender pat searches facilitator guide PDF. Agency provided the number of security staff who attended the training instead of the PERCENTAGE of security staff.

Agency reports that training is provided for all new hires. Agency failed to provide a number of security staff who received this training instead of the percentage of security staff.

Agency also failed to upload training logs to the Supplemental file.

Agency to provide auditor with copy of the percentage of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs via the Supplemental File

Agency to provide percentage of security staff who received training on conducting cross-gender pat-down searches in the past 12 months and searches of transgender and intersex inmates training logs through the Supplemental File

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.15(d), 115.15(f) and corrective action is required.

Corrective Action Recommended:

115.15(d): During the Onsite Audit, auditor observed toilet and urinal viewing from outside the housing Mod for L, O and P Mods which is non-compliant with the PREA Standards. Agency was informed during the closeout briefing and will work to correct the cross-gender viewing opportunities.

1. Agency to correct the cross-gender viewing opportunities presented in Modules L, O & P and provide auditor with verification of compliance via Photos or onsite auditor review verification with /standard 115.15(d) through the Supplemental File.

115.15(f): Agency failed to provide a number of security staff who received this training instead of the percentage of security staff.

Agency also failed to upload training logs to the Supplemental file

1. Agency to provide auditor with copy of the percentage of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs via the Supplemental File

2. Agency to provide percentage of security staff who received training on conducting cross-gender pat-down searches in the past 12 months and searches of transgender and intersex inmates training logs through the Supplemental File

Corrective Action Completion 12/10/2024 :

115.15(d): On 12/10/24 Claybank Facility Commander provided a Memorandum to the Custody Division regarding Scheduling at the Claybank Detention Facility which mandates:

"Effective immediately and until further notice, only male staff members are permitted to work in IJKL-MNOP at CDF. This is a permanent adjustment. You will be

	<p>notified of any updates or changes to this order if they occur. We appreciate your understanding and cooperation during this period. Should you have any questions or concerns, please feel free to reach out to me." The memorandum mandate ensures no cross-gender viewing during toileting or changing of clothing as housing modules IJKL-MNOP are male only housing modules.</p> <p>115.15(f): 11/25/24 - Agency uploaded 40 new hire custody staff members to the Supplemental File who attended Guidance on cross-gender and transgender pat searches, and pat search training final. Signed acknowledgements from custody staff members who attended the course was uploaded to the Supplemental File.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.15(d), 115.15(f) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.15.</p>
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<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.16(a): Agency provided auditor with the following documentation which verifies established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment:</p> <p>13.015 Americans with Disability Accommodations-1.pdf Att A1 - Over the Phone Interp (OPI) Pricing - USA (1)-2.docx Att B - Client Contact Information-1.docx Point Book-1.pdf Special Needs accommodations(2).PNG Language line Agreement Terms of Service.pdf Interview with Agency Head indicates that agency has provided Limited English Proficient inmates and disabled inmates with equal opportunity to participate in and benefit fro all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. As an example, intake documentation is printed in English and Spanish, custody staff in Intake and Classification are bi-lingual and Language Line interpreters are also provided.</p>

Interview with 2 Inmates (with disabilities or who are limited English proficient) indicates that they were provided Spanish staff interpreters in Intake and Booking. They acknowledged that the interpreters assisted them with understanding their rights related to sexual abuse and how to report sexual abuse and sexual harassment.

AUDITOR TO TEST FACILITY'S PROCESS FOR SECURING INTERPRETATION SERVICES ON-DEMAND:

During the Mock Intake test, auditor questioned intake staff regarding interpretation services, Language Line. Staff obtained access to Language Line as a courtesy for the Mock test and obtained a Spanish Speaking interpreter rather quickly. The Staff member who assisted the auditor also happened to be Bi-Lingual.

115.16(b): 115.16(a): Agency provided auditor with the following documentation which verifies established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment:

13.015 Americans with Disability Accommodations-1.pdf

Att A1 - Over the Phone Interp (OPI) Pricing - USA (1)-2.docx

Att B - Client Contact Information-1.docx

Point Book-1.pdf

Special Needs accommodations(2).PNG

Language line Agreement Terms of Service.pdf

Interview with 2 Inmates (with disabilities or who are limited English proficient) indicates that they were provided Spanish staff interpreters in Intake and Booking. They acknowledged that the interpreters assisted them with understanding their rights related to sexual abuse and how to report sexual abuse and sexual harassment.

115.16(c): Policy 606 PREA pg 7 mandates that Should an investigation involve inmates who have disabilities or who have limited English proficiency, the first responder shall not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise inmate safety, the performance of first responder duties or the investigation of sexual abuse or sexual harassment allegations.

The agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.

Agency Reports that In the past 12 months, there was no instances where inmate interpreters, readers, or other types of inmate assistants have been used.

Interview with Random Sample of Staff indicates that if they required an interpreter to report sexual abuse, they would not utilize an inmate interpreter, they would ask the services of a Bi-Lingual Staff member or obtain Medical Interpretation Service for translation.

Interview with 2 Inmates (with disabilities or who are limited English proficient) indicates that they were provided Spanish staff interpreters in Intake and Booking. They acknowledged that the interpreters assisted them with understanding their rights related to sexual abuse and how to report sexual abuse and sexual

	<p>harassment.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.16(c).</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.17(a): Policy 300 Consistent with laws meet requirements of Standard 115.17. Policy 300.6.1 Mandatory Disqualification mandates no members or contractors shall be hired who have:</p> <ul style="list-style-type: none"> (a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 USC § 1997). (b) Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent, or was unable to consent or refuse. (c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph {b) of this section. <p>Policy 300.7.3 Classifications with Inmate contact mandates that every person who may have inmate contact as a member or contractor shall, prior to service, undergo a thorough background investigation to verify his/her personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the Sheriff's Office. Agency to provide auditor with questions regarding past conduct (3 Required Questions) for contractors which were asked and answered. Agency required to upload response of the auditor's request to the Supplemental File.</p> <p>115.17(b): Policy 300.7.8(a) Personal Sensitivity - Disqualifying factors include:</p> <ul style="list-style-type: none"> (a) Having been disciplined by any employer (including the military and/or any correctional officer or law enforcement training facility) for acts constituting racial, ethnic or sexual harassment or discrimination. (b) Uttering any epithet derogatory of another person's race, religion, gender, national origin or sexual orientation. (c) Having been disciplined by any employer as an adult for fighting in the workplace. <p>Interview with Administrative (Human Resources) Staff indicates that the facility considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.</p> <p>115.17(c): Policy 300.2 mandates that only those persons who meet the background requirements established by state and federal law shall be authorized to access any Office system or location to conduct work as a vendor or contractor. Policy 300.5</p>

Background Investigations mandates that every candidate for employment shall undergo a thorough background investigation to verify his/ her personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the Solano County Sheriff's Office (11 CCR 1953).

The narrative report and any other relevant background information shall be shared with the psychological evaluator. Information shall also be shared with others involved in the hiring process if it is relevant to their respective evaluations.

A background investigation update may, at the discretion of the Sheriff, be conducted in lieu of a complete new background investigation on a peace officer candidate who is reappointed within 180 days of voluntary separation from the Solano County Sheriff's Office, or who is an interim police chief meeting the requirements contained in 11 CCR 1953(f).

When a correctional officer promotes to sergeant or above and updated background investigation is required for a peace officer candidate due to the change in employment status.

The Office shall either conduct a criminal background records check at least every five years on current members who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.

Agency reports that In the past 12 months,23 persons hired who may have contact with inmates who have had criminal background record checks.

Interview with Administrative (Human Resources) Staff indicates that the facility performs criminal record background checks or considers pertinent civil or administrator of education's probably hired employees who may have contact with inmates and all employees who may have contact with inmates who are considered for promotions this actions also utilize for any contractors and volunteers who have me have contact with inmates as well. FBI searches are completed via LIVESCAN.

115.17(d): Policy 300.2 Policy mandates that only those persons who meet the background requirements established by state and federal law shall be authorized to access any Office system or location to conduct work as a vendor or contractor. Policy 300.5 Background In Investigation mandates that Every candidate for employment shall undergo a thorough background investigation to verify his/ her personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the Solano County Sheriff's Office (11 CCR 1953).

The narrative report and any other relevant background information shall be shared with the psychological evaluator. Information shall also be shared with others involved in the hiring process if it is relevant to their respective evaluations (11 CCR 1953).

300.5.1 BACKGROUND INVESTIGATION UPDATE

A background investigation update may, at the discretion of the Sheriff, be conducted in lieu of a complete new background investigation on a peace officer candidate who is reappointed within 180 days of voluntary separation from the Solano County Sheriff's Office, or who is an interim police chief meeting the requirements contained in 11 CCR 1953(f).

When a correctional officer promotes to sergeant or above and updated background

investigation is required for a peace officer candidate due to the change in employment status.

The Office shall either conduct a criminal background records check at least every five years on current members who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.

Policy 300.8 Vendor/Contractor Employees and Volunteers mandates that Employees of vendors or contractors that enter any location of the Office or access any of it's systems, and all office volunteers shall submit to a criminal records check.

Examples of persons who require, at a minimum, a criminal history check include, but are not limited to employees of the Solano County Department of Information Technology and General Services employees who provide custodial and building maintenance services. Any criminal history discovered will be considered on a case by cases basis as related to disqualification guidelines; however, any felony conviction shall automatically disqualify the candidate from access to Sheriffs Office systems and locations. The Sheriff reserves the right to conduct additional investigation into the candidate's background as deemed necessary to mitigate security risks to the Office.

Agency reports that in the past 12 months, 10 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

Interview with Administrative (Human Resources) Staff indicates that the facility performs criminal record background checks or considers pertinent civil or administrator of education's probably hired employees who may have contact with inmates and all employees who may have contact with inmates who are considered for promotions this actions also utilize for any contractors and volunteers who have me have contact with inmates as well. FBI searches are completed via LIVESCAN.

115.17(e): 300.5.1 BACKGROUND INVESTIGATION UPDATE

A background investigation update may, at the discretion of the Sheriff, be conducted in lieu of a complete new background investigation on a peace officer candidate who is reappointed within 180 days of voluntary separation from the Solano County Sheriff's Office, or who is an interim police chief meeting the requirements contained in 11 CCR 1953(f).

When a correctional officer promotes to sergeant or above and updated background investigation is required for a peace officer candidate due to the change in employment status.

The Office shall either conduct a criminal background records check at least every five years on current members who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.

Policy 300.8 Vendor/Contractor Employees and Volunteers mandates that Employees of vendors or contractors that enter any location of the Office or access any of it's systems, and all office volunteers shall submit to a criminal records check.

Interview with Administrative (Human Resources) Staff indicates that LIVESCAN FBI checks are utilized to conduct criminal record background checks. the Livescan system notifies the Agency whenever current employees are arrested for any criminal action anywhere throughout the nation.

115.17(f): Policy 300 Consistent with laws meet requirements of Standard 115.17. Policy 300.6.1 Mandatory Disqualification mandates no members or contractors shall be hired who have:

(a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 USC § 1997).

(b) Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent, or was unable to consent or refuse.

(c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph {b) of this section.

Policy 300.7.3 Classifications with Inmate contact mandates that every person who may have inmate contact as a member or contractor shall, prior to service, undergo a thorough background investigation to verify his/her personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the Sheriff's Office.

Policy 300.6.1(h) Mandatory Disqualification mandates that Any applicant for employment with this office who knowingly and deliberately makes false statements or omissions of material fact on any application document submitted to the office shall be denied appointment. False statements include but are not limited to deliberately being non-responsive to answers and knowingly providing evasive statements of any type.

The Office shall ask all candidates who may have contact with inmates to disclose any conduct described above in written applications or interviews. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

Interview with Administrative (Human Resources) Staff indicates that all applicants and employees who may have contact with inmates about previous misconduct described in Standard provision 115.17(a) in written application for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees by way of the 3 required questions form. The facility also imposes upon employees a continuing affirmative duty to disclose any such previous misconduct.

115.17(g): Policy 300.6.1(h) Mandatory Disqualification mandates that Any applicant for employment with this office who knowingly and deliberately makes false statements or omissions of material fact on any application document submitted to the office shall be denied appointment. False statements include but are not limited to deliberately being non-responsive to answers and knowingly providing evasive statements of any type.

The Office shall ask all candidates who may have contact with inmates to disclose any conduct described above in written applications or interviews. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

115.17(h): Agency reports that Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer

	<p>for whom such employee has applied to work. Interview with Administrative (Human Resources) Staff indicates that employee applies for work at another institution, upon request for the restitution, the Silja provides information on substantiated allegations of sexual Meuser, sexual harassment involving the former employee, unless prohibited by law. The requesting agency reviews background information on-site only. They are allowed to take notes, but not allowed to remove any documented information.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.17(a), and corrective action is required.</p> <p><u>Corrective Action Recommended:</u></p> <p>115.17(a): Agency failed to provide auditor with the 3 Required Questions responses for 10 Contractors selected by the auditor.</p> <ol style="list-style-type: none"> 1. Agency required to provide (3 Required Questions response documentation) for the 10 identified Contractors. 2. Agency required to upload response of the auditor's request to the Supplemental File to verify compliance with Standard provisions 115.17(a) <p><u>Corrective Action Completion 10/22/24:</u></p> <p>115.17(a): 10/22/24, Agency provided auditor with 3 Required Questions for all contractors as requested and uploaded to the Supplemental File.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.17(a) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.17.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.18(a): PAQ indicates that The agency/facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later. Interview with Agency Head or designee indicates that when designing, acquiring or</p>

planning, substantial modifications to facilities, usually considers the effects of such changes on its ability to protect inmates from sexual abuse. The Claybank facility has upgraded our camera system throughout the facility in order to eliminate the remaining blind spots.

Interview with Facility Commander or Designee indicates that there has been no expansion or modification of the facility over the past 12 months.

115.18(b): Agency reports that the agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.

Interview with Agency Head or designee indicates that monitoring technology, enhances protection of inmates from incidence of sexual abuse by way of obtaining recording cameras and maintaining recordings by restoring data on the cloud.

Interview with Facility Commander or Designee indicates that when installing or dating monitoring technology, such as video monitoring system, or electronic surveillance of silly considers, using such technology to enhance it, makes protection from sexual abuse. All factors are taken into consideration in order to address any non-compliant issues.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.18(b) and corrective action is required.

Corrective Action Recommended:

115.18(b): Agency reports that the agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.

1. Agency to provide auditor via the Supplemental File with Minutes from meetings referencing installing or updating monitoring technology.

Corrective Action Completion 12/13/2024:

115.18(b): 12/13/24 - Agency uploaded a 12/10/24 Security Update Memorandum from the Claybank Detention Facility Commander to the PREA Auditor, which states: "Since the last CDF audit, there has been a Security Electronics Upgrade. The upgrade includes the following:

Jail Management System interface on CDF officer tablets which displays inmate information. Key Watcher Boxes are going to be updated to GEN II (Swap out computer boards) Network Fiber-optic installed to replace aging copper wire Camera replacement is ongoing (replacement cameras were purchased).

Video PC replacement for camera views in central control. Currently waiting for one more component to be updated and installed. New video servers were purchased to replace the outdated current servers. These are being programmed and, once

	<p>completed, will be shipped and installed. These are all the details of the upgrades to CDF."</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.18(b) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.18.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.21(a): Policy 606 PREA The agency/facility has sole responsibility for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct. If the investigation is referred to another agency for investigation, the Office shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through (e). The referral shall be documented. The Office shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71) If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115.71).</p> <p>When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. Policy 606 PREA mandates that Evidence collection shall be based on a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).</p> <p>Interview with Random Sample of Staff indicates that they know the agencies protocol for obtaining usable, physical evidence of sexual abuse by securing the evidence. First responder protocol is to separate the victim and the perpetrator, place them in holding areas where they do not have contact with running water and viewed by staff at all times awaiting the Shift Supervisor and Investigators. Contact the Shift Supervisor or immediate upper level staff, contact medical and investigative staff. Secure crime scene.</p> <p>115.21(b): Policy 606 PREA mandates that evidence collection shall be based on a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or</p>

similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).

115.21(c): Policy 606 PREA mandates that Forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SAN Es). If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21). No Forensic examinations are conducted onsite.

Agency reports that no forensic medical exams were conducted during the past 12 months.

Interview with SAFEs / SANEs Staff indicate that SART Nurse Practitioners are on-call and available 24/7 to respond and conduct forensic medical examinations for the Napa, Solano and Marin County Jail facilities. Examinations are conducted in the hospital. Victim advocates are allowed to be present during the forensic examinations and the examinations are documented. Forensic evidence obtained during the examination is provided to the on-site investigator for their case.

115.21(d): Agency provided auditor with copy of the MOU between the Solano County Sheriff's Office and Safequest Solano. Safequest Solano provides for victim advocacy and 3rd party reporting through sexual assault hotline or call toll-free from any inmate phone. Policy 606.8 Sexual Assault and Abuse Victims mandates that A victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Office shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Office, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented. A rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in (34 USC§ 12511 (b)(2)(C), to sexual assault victims of all ages. A rape crisis center that is part of a government unit may be used if it is not part of the criminal justice system (such as a law enforcement agency) and it offers a level of confidentiality comparable to the level at a nongovernmental entity that provides similar victim services (28 CFR 115.21). Auditor has determined that the Term of contract is 7/1/2021 to 6/30/2024 which has expired. Agency to obtain an updated MOU that is in effect throughout the PREA Audit.

On 10/16/24, Agency provided auditor with MOU entered into between the Solano County Sheriff's Office and SAFEQUEST Solano, Inc. The Term of the MOU shall take effect 7/1/2024 and remain in effect until 6/30/ 2027. MOU has been uploaded to the Supplemental File

Interview with PREA Compliance Manager indicates that if requested by the victim, victim advocates accompany and provide emotional support, crisis intervention, information, and referrals during the forensic examination process and investigatory interviews. The SART Nurse can contact SAFEQUEST to request the advocate on duty be made available to accompany the victim or the investigator can call SAFEQUEST to request an advocate to accompany the victim to the SART exam.

During the Onsite Audit, only 1 inmate who reported sexual abuse was housed at the

	<p>Claybank facility but was released from custody 1 week prior to the Onsite Audit. No additional inmate reporters were housed at the Claybank Facility.</p> <p>115.21(e): Agency reports that If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.</p> <p>Interview with PREA Compliance Manager indicates that Agency ensures that SAFEQUEST provides victim advocate services based upon the MOU between the Solano County Sheriff's Department and SAFEQUEST.</p> <p>During the Onsite Audit, only 1 inmate who reported sexual abuse was housed at the Claybank facility but was released from custody 1 week prior to the Onsite Audit. No additional inmate reporters were housed at the Claybank Facility.</p> <p>115.21(f): N/A - Agency/Facility is responsible for conducting administrative and criminal sexual abuse investigations.</p> <p>115.21(g): N/A - Auditor is not required to audit this provision.</p> <p>115.21(h): N/A - Agency always makes victim advocate from a rape crisis center available to victims.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.21.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.22(a): The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct).</p> <p>Agency reports that in the past 12 months, 2 allegations of sexual abuse and sexual harassment were received.</p> <p>In the past 12 months, 1 allegation resulting in an administrative investigation.</p> <p>In the past 12 months, 1 allegations referred for criminal investigation.</p> <p>Agency reports that referring to allegations received during the past 12 months, all administrative and/or criminal investigations were completed.</p> <p>Interview with Agency Head or designee indicates that did you see ensures that</p>

Administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. Once reported, the complaint is provided to the PREA Coordinator where it is determined to be investigated criminally or by way of the Internal Affairs Division for investigation.

115.22(b): Policy 606.10 PREA mandates that An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

Policy 606.5 Reporting mandates that During intake the Office shall notify all inmates of the zero-tolerance policy regarding sexual abuse and sexual harassment, and of at least one way to report abuse or harassment to a public or private entity that is not part of the Office and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to office officials. This allows the inmate to remain anonymous (28 CFR 115.32; 28 CFR 115.51).

An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22).

Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

Interview with investigative staff indicates that policy requires that allegations of sexual abuse or sexual harassment. We referred for investigations to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior.

115.22(c): N/A - Agency/Facility is responsible for criminal investigations.

115.22(d): N/A - Auditor is not required to audit this provision

115.22(e): N/A - Auditor is not required to audit this provision

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.22.

115.31	Employee training
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 1477 539">115.31(a): PREA Policy 606 mandates that "This office has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all inmates from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment."</p> <p data-bbox="256 551 1477 916">Policy 304 PREA Member Training mandates that All members who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within these facilities. The Training Manager shall ensure that each member receives training in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse. The Training Manager shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32):</p> <ul data-bbox="256 927 1453 1462" style="list-style-type: none"> (a) The zero-tolerance policy for sexual abuse and sexual harassment and how to report such incidents. (b) The dynamics of sexual abuse and sexual harassment in confinement. (d) Individual responsibilities under sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures. (e) An individuals' right to be free from sexual abuse and sexual harassment. (f) The right of inmates and members to be free from retaliation for reporting sexual abuse and sexual harassment. (g) How to detect and respond to signs of threatened and actual sexual abuse. (h) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates. (i) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities. <p data-bbox="256 1473 1062 1509">U)How to avoid inappropriate relationships with inmates.</p> <p data-bbox="256 1520 1437 1720">Agency provided auditor with copy of the complete PREA 8-hour training roster and signed acknowledgements of 14 custody staff who are assigned to the Claybank Facility conducted by the Agency which complies with PREA. Training verification documentation indicates members have received and, understand the training to include signed acknowledgements to verify compliance with Standard 115.31.</p> <p data-bbox="256 1731 1477 2096">Interview with Random Sample of Staff indicates interviewee was hired in 2001 and last PREA Bi-annual refresher training attended was conducted in 2023. Training covered in the training was zero-tolerance, fulfilling responsibilities regarding sexual abuse, sexual harassment prevention, detection, reporting and response, inmate rights under PREA common reactions of sexual abuse and sexual harassment victims, detection and response to signs of threatened and actual sexual abuse and how to communicate effectively and professionally with LGBTI inmates. Additional interviews with 8 additional staff indicated that they attended bi-annual PREA training in either 2023 or 2024.</p>

	<p>115.31(b): Policy 304 PREA Member Training mandates that Training shall be tailored according to the sex of the inmates at the facility. Members should receive additional training on security measures and the separation of male and female populations in the same facility if inmates have been reassigned from a facility that houses only male or female inmates.</p> <p>115.31(c): Policy 304 PREA Member Training mandates that the Training Manager shall ensure that members undergo refresher training every two years that covers the office's sexual abuse and sexual harassment policies and related procedures. On the years the member does not receive refresher training, the office shall provide information on sexual abuse and sexual harassment (28 CFR 115.31). The Training Manager shall ensure that members undergo refresher training every two years that covers the office's sexual abuse and sexual harassment policies and related procedures. On the years the member does not receive refresher training, the office shall provide information on sexual abuse and sexual harassment (28 CFR 115.31). 9 interviewed custody staff state refresher training was conducted in year 2023 and 2024.</p> <p>115.31(d): Policy 304 PREA Member Training mandates that the Training Manager shall document, through signature or electronic verification, that members have received and understand the training. The Training Unit will maintain training records on all those receiving training in accordance with procedures developed by the Training Manager. Agency provided 14 PREA Training Rosters and signed acknowledgements of Custody staff who attended PREA Refresher Training during 2023 and 2024. Rosters and acknowledgements were uploaded to the Supplemental File.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.31.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.32(a): Policy 304 PREA mandates that The Solano County Sheriffs Office endeavors to comply with the training standards in the PREA Rule and to ensure that all staff, volunteers and contractors, hereafter referred to as members, are aware of their responsibilities and that members and inmates are aware of the policies and</p>

	<p>procedures of the facilities as they relate to PREA. This policy shall be reviewed and acknowledged by members on an annual basis. Agency indicates that 18 volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Interview with 10 Volunteers and 10 contractors who have contact with inmates indicate they have been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response, per agency policy and procedure.</p> <p>115.32(b): The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Auditor review of Contractor training provided by agency verifies PREA compliance. Interview with 10 Volunteers and 10 contractors who have contact with inmates indicate they have been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response, per agency policy and procedure. Training consisted of zero-tolerance of sexual abuse and sexual harassment, reporting sexual abuse or sexual harassment to the program manager, training video which reviewed policy & procedures and rules before entering jail.</p> <p>115.32(c): Agency reports that the agency maintains documentation confirming that volunteers and contractors understand the training they have received. Agency has provided documentation confirming that 8 volunteer / contractors understand the training they have received through signed acknowledgements, however, the forms do not identify which are volunteers and which are contractors.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.32.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.33(a): Policy 606 PREA pages 2 & 5 of Intake mandates that "During intake the Office shall notify all inmates of the zero-tolerance policy regarding sexual abuse and sexual harassment, and of at least one way to report abuse or harassment to a public or private entity that is not part of the Office and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to office officials. This allows the inmate to remain anonymous (28 CFR 115.32; 28 CFR 115.51</p>

)."

Agency reports that 367 inmates admitted during past 12 months who were given this information at intake.

Interview with Intake Staff indicates that intake staff provides inmates with information about the zero tolerance policy, and how to report incidents of or suspicions of sexual abuse or sexual harassment. Current inmates, as well as those transferred from other facilities, have an education on the agencies, zero tolerance policy on sexual abuse or sexual harassment. Inmates are provided END THE SILENCE PREA pamphlets which covers Zero-Tolerance for sexual abuse and sexual harassment, Right to Report, How to Report, Definitions of sexual abuse, sexual harassment and retaliation and who to report to either within the facility or outside of the facility. Pamphlets are provided to inmates in English and Spanish when they are trained in intake. Inmate also review the PREA Video every Wednesday between 0700 & 1500 hours played in the housing units of all 3 facilities. PREA Video is a followup to the comprehensive document signed by the inmate during intake prior to initial arrival at their respective housing units.

Interview with 14 Random Inmates through Interview Questionnaire indicates that they received a copy of the Inmate Handbook and PREA End the Silence pamphlet, to include mandatory viewing of the PREA followup video upon arrival at their respective housing units.

DURING SITE REVIEW

AUDITOR TO TEST INTAKE OR MOCK DEMO RE: INTAKE PROCESS & INTAKE DOCUMENTATION:

Arresting officer brings inmate to Intake for Booking. Medical nurse meets inmate at intake and asks PREA Questions to include medical and mental health history. Nurse also asks about past sexual abuse outside of incarceration settings.

Receiving Intake officer conducts pat search then conducts 2 thumb Live Scan to see if inmate had been booked into the Solano County Jail previously and informs him/her of the initial PREA rights. Inmate is then placed in a holding cell based upon charges and criminal history. Inmate is then printed through the LiveScan machine. If inmate to be housed in one of the facilities, Classification officer classifies the inmate with initial interview questions and PREA comprehensive training questions. Initial interview questions are asked of inmate and signature requested for acknowledgement that the Initial and Comprehensive PREA questions were asked and answered. Inmate is provided a Rulebook and PREA Pamphlet, then asked if he would like to speak with Mental Health practitioner if he had been a victim of sexual abuse or sexually abusive in the past. If so, Intake staff alerts Mental Health and inmate is seen within 14 days of arrival. Inmate is usually seen no later than 2 days of intake by Mental Health Practitioner.

Inmate is then taken to the Dress-out strip-search room where Intake staff conducts strip search of inmate and provides custody clothing. Inmate is then escorted to assigned housing unit to view the PREA video.

AUDITOR TO TEST INTERPRETATION SERVICES:

During the Mock Intake test, auditor questioned intake staff regarding interpretation services, Language Line. Staff obtained access to Language Line as a courtesy for

the Mock test and obtained a Spanish Speaking interpreter rather quickly. The Staff member who assisted the auditor also happened to be Bi-Lingual.

115.33(b): Agency reports that 69 inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

Interview with Intake Staff indicates that on date of intake inmates are provided the PREA Pamphlet and PREA video, which educates them on 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.

Interview with Inmate Interview Questionnaire indicates that upon date of intake:

- The intake staff advises inmates on their rights not to be sexually abuse or sexually harassed,
- How to report sexual abuse and sexual harassment,
- Their right not to be punished for reporting sexual abuse or sexual harassment.

AUDITOR TO OBSERVE COMPREHENSIVE EDUCATION PROCESS WITH I/M CONFINED IN FACILITY OR HAVE MOCK EDUCATION SESSION PERFORMED:

Mock Demo performed for Standard provision 115.33(a)

CONDUCT DOCUMENT REVIEW OF INTAKE RECORDS OF INMATES ENTERING FACILITY IN PAST 12 MONTHS TO INCLUDE COMPREHENSIVE PREA EDUCATION:

Requested information provided in Supplemental File

115.33(c): Agency reports that all inmates are PREA educated within 30 days of intake. Policy 18.001 PREA Requirements 115.41-1 & 2 mandates that all newly booked inmates shall receive, upon completion of the booking process, a copy of the Inmate Rules, which provides the inmate with information pertaining to avoiding sexual assault while in custody, how to report an assault, and services available to victims of sexual assault, both in and out of custody. Section IV Procedure A. Screening Process states that all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or for being sexually abusive toward other inmates. Any information provided by the inmate is confidential and will be released on a need-to-know basis. All inmates are educated at the time of intake and then re-educated when transferred to a new facility. Every Wednesday, the PREA education video is played on the TVs from 0700 to 1300 hours.

Interview with Intake Staff indicates that intake staff provides inmates with information about the zero tolerance policy, and how to report incidents of or suspicions of sexual abuse or sexual harassment.

Current inmates, as well as those transferred from other facilities, have an education on the agencies, zero tolerance policy on sexual abuse or sexual harassment.

Inmates are provided END THE SILENCE PREA pamphlets which covers Zero-

Tolerance for sexual abuse and sexual harassment, Right to Report, How to Report, Definitions of sexual abuse, sexual harassment and retaliation and who to report to either within the facility or outside of the facility. Pamphlets are provided to inmates in English and Spanish when they are trained in intake. Inmate also review the PREA Video every Wednesday between 0700 & 1500 hours played in the housing units of all 3 facilities. PREA Video is a followup to the comprehensive document signed by the inmate during intake prior to initial arrival at their respective housing units.

115.33(d): Agency reports that Inmate PREA education is available in formats accessible to all inmates, including those who are:

- Limited English Proficient (LEP) Visually impaired
- Otherwise disabled
- Limited Reading Skills

Page 28 of The Inmate Handbook provides information for inmates to access the Title II Americans with Disability Act of 1990. As states ""There are TTY and TDD telephones available within the Solano County Sheriff's Office Detention Facilities. Inmate requiring the use of either a TTY or TDD telephone must inform the Module Officer, who will obtain the device for use by the hearing impaired or deaf inmate.""

Pages 29 & 30 of the Inmate Handbook provides inmates with the following:
Inmate Notice -

The Solano County Sheriff's Office does not discriminate on the basis of disability in providing access to its facilities, programs, services, and activities. This notice is provided as required by Title II of the Americans with Disabilities Act of 1990. If you have questions, complaints or request for additional information regarding the ADA, forward your inquiry to the designated ADA Division Representative at the facility at which you are housed by completing the ""ADA Request for Accommodation form. This form is available upon request from your module officer. Solano County Sheriff's Office Americans with Disabilities Act (ADA) Policy:

No inmate who is a qualified individual with a disability shall by reason of such disability, be excluded from participation in, or be denied benefits of services, programs, or activities of the jail or be subjected to discrimination.

If an inmate is requesting accommodation in order to participate in a service, program, or activity provided by the jail, the inmate shall notify his/ her Module Officer of the request. If an inmate believes that he / she has not been provided with a reasonable accommodation, the inmate may file a formal grievance.

Instructions for submitting a formal grievance may be found in this publication under "Inmate Grievances."

SOLANO COUNTY ADA COMPLAINT PROCEDURE:

If an inmate believes that the Solano County Sheriff's Office has failed to comply with and/or carry out its responsibilities under the American's with Disabilities Act, the inmate may contact the Custody Division ADA Coordinator at 530 Union Ave. Suite 100 Fairfield Ca. 94533, or file a formal grievance. Instructions for submitting a formal grievance may be found in this publication under "Inmate Grievances

Specific educational materials available for inmates who are hearing impaired or deaf, blind, LEP and sign language interpreters through Language Line, PREA posters in English and Spanish, POINT Book in intake and housing units when requested, limited

	<p>English proficient, and other resources outlined in Policy 13.015 ADA through the ADA Division Coordinator.</p> <p>115.33(e): Agency reports they maintain documentation of inmate participation in PREA education sessions. Agency provided auditor with:</p> <ul style="list-style-type: none"> - Admission dates - PREA signed education acknowledgement dates - PREA initial and comprehensive education date - Initial screening documentation <p>115.33(f): The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. Access information is provided via the Inmate Rule Book pages 27 to 30 and on poster signage throughout the facilities and in each inmate housing unit.</p> <p>During PREA audit site review, auditor observed PREA signage throughout the facility. PREA Posters, Inmate Handbooks, PREA Brochures are available in both English and Spanish during intake and in the housing units.</p> <p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.33.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.34(a): Policy 304.5 Specialized Investigative Training mandates that Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution (28 CFR 115.21; 28 CFR 115.34).</p> <p>Agency indicates sexual abuse investigators are trained via National Institute of Corrections Investigating Sexual Abuse in a Confinement Setting.</p> <p>Interview with Investigative Staff indicates that Investigators receive training specific to conducting sexual abuse investigations in confinement settings through the National Institute of Corrections. 3 hours of training is conducted On-Line and involves:</p> <ul style="list-style-type: none"> - Investigative Techniques - Gathering Evidence - Miranda and Garrity Warnings

	<p>- Interviewing Victims / Suspects</p> <p>115.34(b): Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Agency indicates sexual abuse investigators are trained via National Institute of Corrections Investigating Sexual Abuse in a Confinement Setting.</p> <p>Interview with Investigative Staff indicate that National Institute of Corrections training topics include:</p> <ul style="list-style-type: none"> - Techniques for interviewing sexual abuse victims - Proper use of Miranda and Garrity warnings - Sexual abuse evidence collection in confinement settings - Criteria and evidence required to substantiate a case for administrative or prosecution referral <p>115.34(c): Agency reports that 122 staff members have completed the required Specialized Investigator training to conduct Sexual Abuse Investigation in a Confinement Setting through the National Institute of Corrections NIC. Agency uploaded NCIC Certification for Sexual Abuse Investigation Completion for 96 custody staff who are certified to conduct Sexual Abuse Investigations in a Confinement Setting through NIC course completion.</p> <p>115.34(d): Auditor not required to audit this provision</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.34.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.35(a): Policy 304.4 PREA Specialized, Medical Training mandates that All full- and part-time qualified health care and mental health professionals who work regularly in the detention facilities shall receive all of the member training listed above, as well as training that includes (28 CFR 115.35):</p> <ul style="list-style-type: none"> (a) Detecting and assessing signs of sexual abuse and sexual harassment. (b) Preserving physical evidence of sexual abuse. (c) Responding effectively and professionally to victims of sexual abuse and sexual harassment.

(d) Reporting allegations or suspicions of sexual abuse and sexual harassment. If the qualified health care and mental health professionals employed at these facilities request that a sexual assault forensic examination be conducted, a criminal investigation shall be initiated and will coordinate the examination through the contracted forensic examination medical provider.

Agency reports that 53 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. 53 percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy.

Interview with Medical and Mental Health Staff indicates that interview with one medical and one mental health staff indicate that the training they received was PREA training and registered nurse training to include how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Agency reports that 53 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. 53 percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy.

PREA training acknowledgement documentation provided to auditor for both assigned Medical and Mental Health practitioners indicated only 23 full-time staff members have completed the PREA Training as mandated by Standard provision 115.35(a).

Agency to provide auditor via the Supplemental File with Training records and personnel records to verify that regular practitioners have been trained ("regular" does not include practitioners who are engaged infrequently).

115.35(b): N/A - Agency reports that Agency medical staff at this facility does not conduct forensic medical examinations.

Interview with Medical and Mental Health Staff indicates that Medical or Mental Health staff do not conduct forensic medical examinations at the facility or for the Agency. Inmates are provided forensic medical examinations at county hospitals by SAFE/SANE/SART exam nurses.

115.35(c): Agency reports it maintains documentation showing that medical and mental health practitioners have completed the required training. Standard provision 115.35(a) indicated and provided auditor that 53 medical and mental health practitioners have completed the required PREA training. Agency uploaded PREA training acknowledgements for medical and mental health practitioners to Standard provision 115.35(c), and the total number came to 23 practitioners.

Agency to clarify why the number of trained practitioners who have completed the required training are missing 20 practitioner training acknowledgements.

Please provide auditor with copies of the training acknowledgements for the missing medical and mental health practitioners and upload to the Supplemental File.

115.35(d): Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency>

Agency to provide Training logs of medical and mental health care practitioners to ensure they received the training mandated for employees AND contractors/

volunteers (depending on their status) in the referenced standards through the Supplemental File.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.35(a), 115.35(c), 115.35(d) and corrective action is required.

Corrective Action Recommended:

115.35(a): Agency reports that 53 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. 53 percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy. PREA training acknowledgement documentation provided to auditor for both assigned Medical and Mental Health practitioners indicated only 23 full-time staff members have completed the PREA Training as mandated by Standard provision 115.35(a).

1. Agency to provide auditor via the Supplemental File with Training records and personnel records to verify that practitioners who worked regularly at the Claybank Facility have been trained ("regular" does not include practitioners who are engaged infrequently).

115.35(c): Standard provision 115.35(a) indicated and provided auditor that 53 medical and mental health practitioners have completed the required PREA training. Agency uploaded PREA training acknowledgements for medical and mental health practitioners to Standard provision 115.35(c), and the total number came to 23 practitioners.

1. Agency to clarify why the number of trained practitioners who have completed the required training are missing 20 practitioner training acknowledgements.
2. Please provide auditor with copies of the training acknowledgements for the missing medical and mental health practitioners and upload to the Supplemental File.

115.35(d): Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.

1. Agency to provide Training logs of medical and mental health care practitioners to ensure they received the training mandated for employees AND contractors/ volunteers (depending on their status) in the referenced standards through the Supplemental File.

Corrective Action Completion 11/26/24 :

115.35(a): 11/26/24 - Agency provided updated list of 51 medical and mental health practitioners training acknowledgements which verifies that 100% of both medical and mental health practitioners who work regularly for the Agency. Training acknowledgements were uploaded to the Supplemental File. Agency indicated that the previous number provided on the PRE-AUDIT Questionnaire was in error.

115.35(c): 11/26/24 - Agency provided the Correct list of medical-mental health staff and indicated that the previous number provided on the Pre-Audit Questionnaire was in error.

115.35(d): 11/26/24 - Agency provided updated list of 51 medical and mental health practitioners training acknowledgements which verifies that 100% of both medical and mental health practitioners who work regularly for the Agency. Training acknowledgements were uploaded to the Supplemental File. Agency indicated that the previous number provided on the PRE-AUDIT Questionnaire was in error.

The agency/facility has met the requirements of Standard provision(s) 115.35(a), 115.35(c), 115.35(d) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.35.

115.41 Screening for risk of victimization and abusiveness	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.41(a): Policy 8.001 Classification PREA Requirements mandates that all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or for being sexually abusive toward other inmates. Any information provided by the inmate is confidential and will be released on a need-to-know basis.</p> <p>Inmates who are being transferred out of the facility shall have their files reviewed the day they are to be transferred to another facility. If an inmate is found to have either been victimized or suspected of sexual assault or abuse while in our custody, a notification letter shall be authored and provided to the receiving facility.</p>

Interview with Staff Responsible for Risk Screening indicates that it makes our screen upon admission to the facility or transfer from another facility for risk of sexual abuse, victimization or sexual abusiveness towards other inmates.

Interview with Inmate Interview Questionnaire indicates that during intake at main jail, inmate informed auditor that he was asked questions such as, has he been incarcerated in prison or jail before, whether or not, he has ever been sexually abused in the past, and his sexual identity. Inmate was asked those questions again when transferred to Claybank facility.

AUDITOR TO CONDUCT PREA RISK SCREENING OR MOCK DEMO:

Arresting officer brings inmate to Intake for Booking. Medical nurse meets inmate at intake and asks PREA Questions to include medical and mental health history. Nurse also asks about past sexual abuse outside of incarceration settings.

Receiving Intake officer conducts pat search then conducts 2 thumb Live Scan to see if inmate had been booked into the Solano County Jail previously and informs him/her of the initial PREA rights. Inmate is then placed in a holding cell based upon charges and criminal history. Inmate is then printed through the LiveScan machine. If inmate to be housed in one of the facilities, Classification officer classifies the inmate with initial interview questions and PREA comprehensive training questions. Initial interview questions are asked of inmate and signature requested for acknowledgement that the Initial and Comprehensive PREA questions were asked and answered. Inmate is provided a Rulebook and PREA Pamphlet, then asked if he would like to speak with Mental Health practitioner if he had been a victim of sexual abuse or sexually abusive in the past. If so, Intake staff alerts Mental Health and inmate is seen within 14 days of arrival. Inmate is usually seen no later than 2 days of intake by Mental Health Practitioner.

Inmate is then taken to the Dress-out strip-search room where Intake staff conducts strip search of inmate and provides custody clothing. Inmate is then escorted to assigned housing unit to view the PREA video. Within 30 days of intake, inmates housed at the Claybank Facility are reassessed for victimization.

115.42(b): Policy 8.001 Classification PREA Requirements mandates that all inmates shall be screened within 24 hours of arrival for potential vulnerabilities to become victimized or tendencies of acting out with sexually aggressive behavior. The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse, as known to the office; in assessing inmates for risk of being sexually abusive.

Agency reports 367 or 100% of inmates entered the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility. All inmates are screened as soon as they are transferred to the Claybank Detention Facility CDF.

Interview with Staff Responsible for Risk Screening indicates that the screen inmates for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of intake.

Interview with Inmate Interview Questionnaire indicates that Interview with Inmate

Interview Questionnaire indicates that during intake at main jail, inmate informed auditor that he was asked questions such as, has he been incarcerated in prison or jail before, whether or not, he has ever been sexually abused in the past, and his sexual identity. Inmate was asked those questions again when transferred to Claybank facility.

115.41(c): Agency reports that risk assessment is conducted using an objective screening instrument identified as the PREA Screening Checklist and Education. A blank copy of the checklist was provided to auditor via the Supplemental file. "Sheet New. Agency also provided auditor with copy of their Classification Questions. Both Screening Checklist and Classification Questions meets the Standard or a weighted objective screening instrument with an override component. The instrument also includes the PREA Comprehensive Education Sheet which verifies that inmate has been provided both initial and comprehensive PREA education and inmate acknowledges that he or she has the opportunity ask questions of the Classification Officer. Inmate acknowledges receipt of the inmate Brochure and Inmate Rulebook, reviewed the video titled "End of Silence" and "PREA What you need to know" to include review of the Zero-Tolerance Policy. Here is the complete number of components signed for and acknowledged by each inmate after screening, signed by the intake or classification Sergeant:

- > A 16 minute video titled "PREA: What You Need To Know" may be played in your housing unit.
- > I understand that the Solano County Sheriff's Office has a Zero Tolerance policy for sexual abuse and harassment."
- > I understand what Sexual Harassment is.
- > I understand what Sexual Abuse is.
- > I understand what Staff Voyeurism is.
- > I understand that I have the right to report sexual abuse privately, safely, and through multiple channels
- > I understand that I have the right to get help from trained medical and mental health care professionals
- > I understand that all Sheriff's Office Employees, Volunteers and Contractors (including medical and mental health) are mandatory reporters for any Sexual Abuse/ Harassment.
- > I understand that sexual activity between a staff member and an inmate can never be consensual and is always against the law.
- > I understand that I have the right to be protected from sexual abuse.
- > I have received a brochure titled "END THE SILENCE" & a rule book with PREA information as well as outside reporting telephone numbers (pages 27-29 in the rulebook.

115.41(d): 115.41(d): Review of the initial screening, Classification Questions and objective screening instrument includes all criteria identified to assess inmates for risk of sexual victimization per PREA.

Interview staff responsible for Risk Screening the initial screening considers, a questionnaire, asking PREA questions,, any gang, affiliation, assault, history, etc. The

process for conducting initial screening consists of having inmate in an area where confidential interviewing can be conducted. Inmate asked the PREA questions and responses are documented on the form. Inmate is requested to sign the form after the screening questions have been conducted.

The intake screening does not appear to 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?

Agency to explain why intake screening instrument does not consider: (10) Whether the inmate is detained solely for civil immigration purposes?

115.41(e): The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive as identified in the Risk Screening Process documentation.

Interview staff responsible for Risk Screening the initial screening considers, a questionnaire, asking PREA questions,, any gang, affiliation, assault, history, etc. The process for conducting initial screening consists of having inmate in an area where confidential interviewing can be conducted. Inmate asked the PREA questions and responses are documented on the form. Inmate is requested to sign the form after the screening questions have been conducted.

115.41(f): Policy 18.001 Classification Victimization Risk mandates that Within 30 days of arrival, or if any additional information is received that bears on an inmate's risk of sexual victimization or abusiveness, an inmate's risk level for sexual assault or abusiveness shall be reassessed.

Interview with Staff Responsible for Risk Screening indicates that no less than 24 hours of arrival at the facility, inmate, risk, level is reassessed.

Interview with Inmate Interview Questionnaire indicates that upon intake, inmates are questioned regarding jail history, prior sexual abuse history, and sexual identity.

Inmates are asked same questions upon transfer to another facility or when assessed by a mental health practitioner.

115.41(g): Policy 18.001 Classification Victimization Risk mandates that Within 30 days of arrival, or if any additional information is received that bears on an inmate's risk of sexual victimization or abusiveness, an inmate's risk level for sexual assault or abusiveness shall be reassessed.

Interview with Staff Responsible for Risk Screening indicates that the agency outlines who can have access to an inmates risk assessment with facility in order to protect sensitive information from exploitation. Classification and upper management has access to these records.

Interview with Inmate Interview Questionnaire indicates that when arrived at the facility, inmates are informed of their rights not to be sexually, abused or sexually harassed, how to report sexual sexual harassment, and informed of their rights not to be punished for reporting sexual abuse or sexual harassment. Inmates are informed of this information upon intake. Inmates are asked these questions again when assessed by mental health practitioner, transferred to another facility or initial reassessment within 30 days of intake.

115.41(h): Policy 18.003 Classification Class Status & Housing mandates that If, during the interview process, an inmate refuses to answer questions, including those which may pertain to a disability, sexual orientation, past victimization, or their own perception of abuse, the inmate shall not be subject to any discipline for failing or refusing to answer.

Interview with Staff Responsible for Risk Screening indicates that inmates are not disciplined for refusing to respond to the PREA questions during Intake and Booking.

115.41(i): Agency indicates that appropriate controls are implemented 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.

Interview with PREA Compliance Manager and PREA Coordinator indicates that Agency as outlined, who should have access to new meets risk assessment of Silletti, in order to protect sensitive information from exploitation, by way of policy, 6.01.

Interview with Staff Responsible for Risk Screening indicates that inmates are not disciplined for refusing to respond to the PREA questions during Intake and Booking.

AUDITOR TO OBSERVE PHYSICAL STORAGE OF ANY INFORMATION/ DOCUMENTATION DURING THE SITE REVIEW.

Interview with Internet Technology (IT) staff indicates that Intake, Classification and Medical documentation are computerized documents:

- Determined safeguards regarding access and security of gathered information
- County user has access credentials - Permission granted levels to access specific documents
- Locked security permissions - Security permission level settings
- Settings made by Business Units or IT, depending on level of access needed
- Must have permission to access the system based upon specific details
- Read only for Business Access - Electronic systems that require permissions: (ATIMS, RIMS & SHAREPOINT)

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.41(d) and corrective action is required.

Corrective Action Recommended:

115.41(f): Agency provided via Supplemental File 23 inmate initial assessment and reassessment for risk of sexual victimization or abusiveness in compliance with Standard provision 115.41(f)-2. Auditor identified one inmate as non-compliant with standard provision 115.41(f). Agency indicated two 30-day reassessments (7/2/24 & 8/1/24), both non-compliant with Standard provision 115.41(f) which requires reassessment of inmates within a set time period not to exceed 30 days after the inmate's arrival at the facility.

1. Agency to provide a copy of the documented reassessment in the Supplemental

	<p>File for the identified inmate, which occurred within 30-days after the inmate's arrival at the facility or provide written clarification as to why the inmate's reassessment did not comply with the PREA Standard.</p> <p>115.41(d): The intake screening does not appear to 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?</p> <p>1. Agency to explain why intake screening instrument does not consider: (10) Whether the inmate is detained solely for civil immigration purposes?</p> <p><u>Corrective Action Completion 12/5/24 :</u></p> <p>115.41(f): 11/25/24 - Agency provided auditor with copy of ATIMS Dashboard entries and 30-day reassessment language which complies with Standard provision 115.41(f) for IP in question.</p> <p>115.41(d): 12/5/24 - Agency provided a memorandum response to the screening process: "The Solano County Sheriff's Office does not book immigration holds. The individual in question has to have some form of a criminal violation, detainers/holds, family civil detainer for failure to pay child or spousal support, or Juvenile Wards of Court (adults now). This is why there is no screening instrument that considers whether an inmate is detained solely for civil immigration purposes". Agency provided a copy of the Immigration Hold Matrix and the Immigration Trust Act to the Supplemental File.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.41(d) & 115.41(f) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.41.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42(a): Policy 18.003 Classification Class Status & Housing mandates that the

agency/facility uses 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. Agency obtains and maintains the PREA Screening Checklist & Education Combo Sheet New.PDF & Classification Questions to obtain this information.

Interview with PREA Compliance Manager indicates that the agency or facility uses information from the wrist screening during intake to keep inmates from being sexually victimized, or being sexually abusive by taking all consideration interview, including the inmate needs.

Interview with Staff Responsible for Risk Screening indicates that agency/facility uses information from the risk screening during intake to keep inmates, safe from being sexually victimized or from being sexually abusive when asking questions regarding prior sexual abuse or sexual predation to determine a need for isolation or protection against sexual predators.

115.42(b): Policy 80.001 Classification PREA and 18.003 Classification Assignment, Status & Housing mandates that:

1. As part of the classification process, each new inmate will be screened within 24 hours for potential vulnerabilities or tendencies to act out with sexually aggressive behavior. Housing assignments will be made accordingly. Inmates identified as at risk for sexual victimization, or with tendencies to act out with sexually aggressive behavior, will be assessed by Mental Health personnel.
2. Male and female inmates will be housed in separate housing areas. Their sleeping quarters will be separated both visually and acoustically.
3. Inmates who identify as lesbian, gay, bisexual, transgender or intersex shall not be housed based solely on such identification. An inmate's personal views shall also be taken into consideration when deciding where they shall be housed.
4. Completed classification reports will be forwarded to the Classification Sergeant so they are available for follow-up the next day if needed."

Interview with Staff Responsible for Risk Screening indicates that agency/facility uses information from the risk screening during intake to keep inmates, safe from being sexually victimized or from being sexually abusive when asking questions regarding prior sexual abuse or sexual predation to determine a need for isolation or protection against sexual predators to ensure the safety of each inmate.

115.42(c): Policy 18.003 Classification Class Status & Housing mandates that:

1. As part of the classification process, each new inmate will be screened within 24 hours for potential vulnerabilities or tendencies to act out with sexually aggressive behavior. Housing assignments will be made accordingly. Inmates identified as at risk for sexual victimization, or with tendencies to act out with sexually aggressive behavior, will be assessed by Mental Health personnel.
2. Male and female inmates will be housed in separate housing areas. Their sleeping quarters will be separated both visually and acoustically.
3. Inmates who identify as lesbian, gay, bisexual, transgender or intersex shall not be housed based solely on such identification. An inmate's personal views shall also be taken into consideration when deciding where they shall be housed.

4. Completed classification reports will be forwarded to the Classification Sergeant so they are available for follow-up the next day if needed.

Interview with the PREA Compliance Manager indicates that housing and program assignments for transgender or intersex is based upon the classification matrix, safety and securing and housed by gender. Protective housing is provided with no split searches. Transgender housing and program assignments are considered on a case-by-case basis to ensure the health and safety of each transgender inmate. The transgender inmate housed at the Stanton Facility refused to cooperate during the interview process by refusing to answer questions.

Interview with PREA Compliance Manager indicates that agency/facility determines housing and program statements for transgender or intersex inmates and considers whether the placement will ensure the inmates health and safety. Do you see also considers whether the placement will present management or security problems. All factors are taken into consideration as regards to health and safety and whether placements may present management or security problems.

The one Transgender inmate housed at the Claybank Facility was released prior to the onsite audit. No Transgender or Intersex inmates were housed during the week that the Onsite Audit was conducted at the Claybank Facility.

115.42(d): "Policy 18.004 Classification Review mandates that:

D. Each inmate will be reviewed once every thirty (30) days if there is no specific problem. The Classification Officer will review any change in:

1. Sentence status.
2. Behavior patterns.
3. Incident reports.
4. Rule violations.
5. Disciplinary act ions.
6. Any information source:"

a. Correctional Officer.

b. Medical staff.

c. Referrals.

e. The Classification Officer will update and change an inmate's classification when necessary. Any change and the reason for change will be documented. If no change is necessary it shall be documented also.

Interview with PREA Compliance Manager indicates that please finish programming assignments for each transgender or in a six in May reassessed to review any threats to safety experience by the inmates, Administrative separated, inmates or reassessed every seven days and general population inmates are assessed every 30 days.

Interview with Staff Responsible for Risk Screening indicates that placement program assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experience by the inmate.

115.42(e): Agency mandates that 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. Agency conducts case review every 30 days while any inmate is housed in any of the 3 Solano County Jail Detention Facilities per Policy 18.004 Classification Review and outlined in Standard provision 115.42(d)

above.

Interview with PREA Compliance Manager indicates that transgender or inner six inmates views respect to his overall safety is given serious consideration in placement and programming assignments.

Interview with Staff Responsible for Risk Screening indicates that transgender or 86 inmates use of his or her safety is given serious consideration and placement and programming assignments.

115.42(f): Agency states that Transgender and intersex inmate shall be given the opportunity to shower separately from other inmates.

Review of the physical plant verifies all showers are separate showers in view of the custody control booth in each housing unit.

Interview with PREA Compliance Manager indicates that transgender intersex inmates given the opportunity to shower separately from other inmates they were given this opportunity due to the fact there's only one shower stall per person or individual showers with curtains throughout the facility. Inmates shower by themselves.

Interview with Staff Responsible for Risk Screening indicates that transgender intersex inmates are provided the opportunity to shower separately from other inmates. Only single showers are available for inmates throughout the Claybank facility.

The one Transgender inmate housed at the Claybank Facility was released prior to the onsite audit. No Transgender or Intersex inmates were housed during the week that the Onsite Audit was conducted at the Claybank Facility.

115.42(g): Agency states they do 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 as they do not possess such facilities.

Physical plant review and interviews with the PREA Coordinator, PREA Compliance Manager and Transgender inmates verifies the Agency statement of no dedicated facilities, units or wings utilized solely on the basis of an inmate's identification or status.

Interview with PREA Coordinator and PREA Compliance Manager indicates that the agency is not subject to a consent decree, legal settlement, or legal judgement requiring that it established dedicated facility, unit, wing for LGBTI inmates.

Interview with One Lesbian Inmate housed at the facility during the Onsite Audit indicates that - Q: 2, 4

The one Transgender inmate housed at the Claybank Facility was released prior to the onsite audit. No Transgender or Intersex inmates were housed during the week that the Onsite Audit was conducted at the Claybank Facility.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.42(g). and corrective action is required

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.43(a): Policy 18.001 Classification PREA Requirements mandates that:</p> <ol style="list-style-type: none"> 1. As part of the classification process, each new inmate will be screened within 24 hours for potential vulnerabilities or tendencies to act out with sexually aggressive behavior. Housing assignments will be made accordingly. Inmates identified as at risk for sexual victimization, or with tendencies to act out with sexually aggressive behavior, will be assessed by Mental Health personnel. 2. Male and female inmates will be housed in separate housing areas. Their sleeping quarters will be separated both visually and acoustically. 3. Inmates who identify as lesbian, gay, bisexual, transgender or intersex shall not be housed based solely on such identification. An inmate's personal views shall also be taken into consideration when deciding where they shall be housed. 4. Completed classification reports will be forwarded to the Classification Sergeant so they are available for follow-up the next day if needed. <p>Policy 606 PREA mandates that Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Inmates may be held in involuntary segregated housing for less than 24 hours while an assessment is completed. If an involuntary segregated housing assignment is made because of a high risk for victimization, the Facility Commander or designee shall clearly document the basis for the concern for the inmate's safety and the reasons why no alternative means of separation can be arranged (28 CFR 115.43).</p> <p>The facility shall assign these inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days. Inmates placed in temporary segregated housing shall continue to have reasonable access to programs, privileges, education and work opportunities. If restrictions are put in place, the Facility Commander shall document the following:</p> <ol style="list-style-type: none"> (a) The opportunities that have been limited (b) The duration of the limitation (c) The reasons for such limitations <p>Agency states that no inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment.</p> <p>Interview with Facility Commander indicates that Solano CJ prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from potential abusers.</p> <p>115.43(b): 1. Inmates at high risk for sexual victimization shall not be placed in involuntary separated housing unless an assessment of all available alternatives has</p>

- been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Inmates may be held in involuntary separation for less than twenty-four (24) hours while an assessment is completed.
2. Inmates placed in separated housing for their safety shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to the preceding is limited, the following shall be documented in the JMS:
 - a. The opportunities limited
 - b. The duration of the limitation
 - c. The reasons for the limitations
 3. Placement into involuntary separation shall include the following documentation in the JMS:
 - a. The reason pertaining to the concern for the inmate's safety
 - b. Why there are no alternatives
 4. Every 30 days, a review to determine a continuing need for separation from general population will be conducted and documented in the JMS.
 5. For inmates who are housed over 30 days on an involuntary basis, the following shall be documented in the JMS:
 - a. The concern for the inmate's safety
 - b. The reason for no alternative means of separation
 6. Every 30 days, a review for the continuing need for separation shall be performed and documented in the JMS.

Interview with Staff who Supervise Inmates in Segregated Housing indicates that when inmates are placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, they still have access to:

- Programs
- Privileges
- Education
- Work opportunities

Auditor was unable to conduct Interviews with Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) as no inmates who meet that criteria were housed at the Claybank facility.

AUDITOR TO CONDUCT REVIEW OF in-cell AND out-of-cell programs, privileges, education, and work opportunities for inmates in segregated housing for this purpose.

If the facility restricts access to programs, privileges, education, or work opportunities, documentation of:

- The opportunities that have been limited;
- The duration of the limitations; and
- The reasons for such limitations.

Interview of staff who Supervise Inmates in Segregated Housing indicates that should inmates be placed in segregated housing for protection of from sexual abuse, or after having alleged sexual abuse, they have access to the following:

- programs,
- privileges,
- education, and

	<p>- work opportunities.</p> <p>If the facility restricts access to the above, all restrictions are documented - AD SEP inmates are reviewed every 7 days and General Population reviewed every 30-days.</p> <p>115.43(c): Agency states that In the past 12 months, no inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement.</p> <p>Interview with Facility Commander indicates that it makes a high risk for sexual victimization, or who have alleged sexual abuse placed an involuntary segregation are housing only until an alternative means of separation from likely abusers can be arranged. Temporary administrative separation is reviewed every seven days.</p> <p>Interview with Staff who Supervise Inmates in Segregated Housing indicates that inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged and separated from all threats and dangers. Inmates placed in involuntary segregation are reviewed every 7 days until protective housing is available.</p> <p>No Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) were housed at the Claybank facility during the Onsite Audit.</p> <p>115.43(d): Agency reports there have been no inmates at risk of sexual victimization who were held in involuntary segregation housing in the past 12 months.</p> <p>115.43(e): Policy 18.001 Classification PREA Requirements mandates that every 30 days, the Facility Commander or designee shall afford each such inmate a review to determine whether there is a continuing need for segregated housing.</p> <p>Interview with Staff who Supervise Inmates in Segregated Housing indicates that once an inmate is assigned to involuntary segregated housing the facility reviews the inmates circumstances every 30 days to determine if continuing placement involuntary segregated housing is needed. Administrative segregated inmates are reviewed every 7 days and inmates assigned to general population are reviewed every 30 days.</p> <p>Auditor found no inmates housed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) during the Onsite Audit.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.43 and corrective action is required</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51(a): Policy 606.5 PREA mandates that Inmates may report incidents anonymously or to any member they choose. In addition, they may report member

neglect or violation of responsibilities that may have contributed to sexual abuse, sexual harassment or retaliation. Members shall accommodate all inmate requests to report such allegations. Members shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).

During intake the Office shall notify all inmates of the zero-tolerance policy regarding sexual abuse and sexual harassment, and of at least one way to report abuse or harassment to a public or private entity that is not part of the Office and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to office officials. This allows the inmate to remain anonymous (28 CFR 115.32; 28 CFR 115.51).

Interview with Random Sample of Staff indicates that inmates can privately report sexual abuse, and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment through SAFEQUEST.

Interview with Inmate Interview Questionnaire indicates that inmates can report any sexual abuse or sexual harassment that happened to them or someone else to report to a staff member, PREA hotline available in each housing unit, medical, mental health practitioners, medical or mental health, PREA Coordinator or PREA Compliance manager.

115.51(b): The agency provides SAFEQUEST as one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. Agency has obtained an MOU with SAFEQUEST which is in force from 2021 to 2024. Responsibilities of SAFEQUEST Solano Inc. are as follows:

- A. Provide a toll-free telephone number inmates can call to report sexual assault or harassment in Sheriff facilities. Installation of the telephone lines at Sheriff facilities will be at Sheriff's expense.
- B. Contact the appropriate Sheriff Facility Commander when a report of sexual assault/harassment is made to them.
- C. Provide Sheriff with a list of current advocates for sexual assault victims and inform the Watch Commander/Incident Commander of the name of the responding advocate.
- D. Maintain confidentiality as required by state standards for certified crisis counselors and NBMC policies and procedures.
- E. Provide any necessary follow-up appointments for counseling requested by inmates.
- F. Comply with all applicable Sheriff's facility policies and procedures as they pertain to safety, security and professional conduct including On-Site Visitation Rules and Guidelines and meet all Clearance Requirements upon entry to any Sheriff facility, as described in Exhibit B, section 10.
- G. Communicate any questions or concerns to the Sheriff PREA Coordinator.
- H. Work with the Sheriff's third party mental health staff and their multidisciplinary team to communicate any medical and mental health conditions, as appropriate, of sexual assault victims and develop individualized treatment plans for these inmates.
- I. Respond to annual inquiries by the Sheriff's contracted PREA Auditor regarding statistical and performance measures described in this agreement."

Policy 606 PREA pg 4 & Inmate Rulebook pg 34 informs inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. Agency never houses inmates detained solely for civil immigration, however, consulate-general addresses in San Francisco is available on page 33 of the inmate handbook.

SAFEQUEST contract July 2021 - June 2024 is non-compliant with 115.51(b). Agency to obtain a renewal MOU contract with SAFEQUEST which is at least effective throughout the PREA Audit. On 10/16/24, Agency provided auditor with MOU entered into between the Solano County Sheriff's Office and SAFEQUEST Solano, Inc. The Term of the MOU shall take effect 7/1/2024 and remain in effect until 6/30/ 2027. MOU has been uploaded to the Supplemental File.

Interview with the PREA Compliance Manager indicates that inmates can report sexual abuse or sexual harassment to a public or private entity or office that is not part of the Agency via SAFEQUEST Hotline #93 on inmate phones in each housing unit. The call enable receipt and immediate transmission of inmate reports of sexual abuse and sexual harassment to agency officials that allow the inmate to remain anonymous upon request.

Interview with Inmate Interview Questionnaire indicates that inmates can report any sexual abuse or sexual harassment that happened to them or someone else to report to a staff member, PREA hotline available in each housing unit, medical, mental health practitioners, medical or mental health, PREA Coordinator or PREA Compliance manager.

115.51(c): Policy 606 PREA mandates that The facility shall provide information to all visitors or third parties on how they may report any incident, or suspected incident of sexual abuse, or sexual harassment to a member (28 CFR 115.54; 15 CCR 1029). Inmates may report incidents anonymously or to any member they choose. In addition, they may report member neglect or violation of responsibilities that may have contributed to sexual abuse, sexual harassment or retaliation. Members shall accommodate all inmate requests to report such allegations. Members shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).

Threats or allegations of sexual abuse, sexual harassment, or retaliation, regardless of the source, shall be documented and referred for investigation. Reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).

During intake the Office shall notify all inmates of the zero-tolerance policy regarding sexual abuse and sexual harassment, and of at least one way to report abuse or harassment to a public or private entity that is not part of the Office and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to office officials. This allows the inmate to remain anonymous (28 CFR 115.32; 28 CFR 115.51).

Agency provided written harassment documentation of IM on IM Verbal Report initiated by alleged victim and was investigated, resulting in perpetrator being rehoused.

Interview with Random Sample of Staff indicates that inmates can report any sexual

abuse or sexual harassment that happened to them or someone else to report to a staff member, PREA hotline available in each housing unit, medical, mental health practitioners, medical or mental health, PREA Coordinator or PREA Compliance manager.

Interview with Inmate Interview Questionnaire indicates that inmates can make reports of sexual abuse or sexual-harassment, either in person or in writing. They can also have someone else, for example, a friend or relative, make the report for them, so they do not have to be named.

115.51(d): TESTING STAFF REPORTING - During the site review, auditor requested a housing staff member to provide the staff reporting method provided by the facility.

The custody staff member indicated staff can report to the Shift Lieutenant PREA Coordinator, PREA Compliance Manager or Facility Commander. Custody staff are not required to report to their direct colleagues or immediate supervisor.

Interview with Random Sample of Staff w indicates staff members can privately report sexual abuse and sexual harassment of inmates to the PREA Compliance Manager, Shift Lieutenant, PREA Compliance Manager, Human Resources, Facility Commander.

DURING AUDIT SITE REVIEW AUDITOR OBSERVES:

SIGNAGE -

During the Onsite Audit review, auditor observed English and Spanish PREA posters in each housing unit posted next to the phones which provides SAFEQUEST PREA hotline access to inmates via dialing #93 which is confidential and free. PREA Signage is also posted throughout the facility in areas where inmates and staff work to include intake and booking where inmates are also provided the inmate handbook and END THE SILENCE brochures which provide inmates with reporting information and contact numbers. PREA posters are also available at visiting booth access for 3rd Party visiting access.

TESTING INTERNAL REPORTING METHODS FOR CONFINED PERSONS -

During the Onsite Audit, auditor tested the internal reporting method which is inmate utilization of the grievance lock box in each housing unit. The watch Sergeant will empty the grievance lock box each shift, review and separate the documentation to ensure PREA complaints are immediately provided to the PREA Coordinator or watch Lieutenant. Documentation which identifies imminent sexual abuse is acted upon immediately.

Confined persons may also report sexual abuse and sexual harassment via the medical/mental health lock box or speak directly to medical/mental health staff, custody staff, volunteers, or contractors. Each of which are mandated reporters instructed and trained to accept reporting of sexual abuse and sexual harassment verbally, in writing, anonymously and from third parties.

PROCESSES FOR SENDING AND RECEIVING MAIL (MAIL DROP BOXES/ MAILROOM) -

Interview of staff responsible for inmate mail process indicates that inmates with no funding are provided a welfare pack once a week which contains pen, paper, 2 envelopes, bar of soap, toothbrush and toothpaste. REGULAR OUTGOING MAIL - The

floor officer searches inmate mail envelopes in the inmate's presence, for contraband. Contraband is identified as anything that could hurt staff or inmates, escape information or information that could cause someone else harm. Envelope is then sealed, staff places their call-sign on the envelope along with a stamp and places in the Inmate Mail bag. Inmate Mail bag is brought to the visiting lobby to be picked up by official Postal Carrier. CONFIDENTIAL MAIL - Inmate shows open envelope to staff for review, then places the letter in the envelope and seals in presence of officer. The officer initials envelope and puts their call-sign on the letter. Officer brings letter to visiting lobby where it is stamped "Inmate Mail" and picked up by official Postal Carrier. INCOMING MAIL - Mail is opened and searched, scanned letter. Postage stamp is removed, then provided to the inmate.

RECORD STORAGE -

Interview with Internet Technology (IT) staff indicates that Intake, Classification and Medical documentation are computerized documents:

- Determined safeguards regarding access and security of gathered information
- County user has access credentials - Permission granted levels to access specific documents
- Locked security permissions - Security permission level settings
- Settings made by Business Units or IT, depending on level of access needed
- Must have permission to access the system based upon specific details
- Read only for Business Access - Electronic systems that require permissions: (ATIMS, RIMS & SHAREPOINT)

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.51.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.52(a): Policy 609.4 PREA Additional Provisions for Grievances Related to Sexual abuse mandates that The following apply to grievances that relate to sexual abuse allegations (28 CFR 115.52; 15 CCR 1029):</p> <p>(a). inmates may submit a grievance regarding an allegation of sexual abuse at any time.</p> <p>(b). Third parties,-including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing such grievances and to file such grievances on behalf of inmates if the inmate agrees to have the grievance filed on his/her behalf. Staff members who receive a grievance</p>

filed by a third party on behalf of an inmate shall inquire whether the inmate wishes to have the grievance processed and shall document the inmate's decision.

(c). Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint

(d) Staff receiving a grievance shall forward the grievance to a supervisor.

Grievances shall not be forwarded to any supervisor who is the subject of the complaint. The supervisor receiving the grievance shall take immediate action if necessary and forward the grievance to the PREA Manager and PREA Coordinator for investigation. The PREA Manager and PREA Coordinator will notify the Facility Commander.

(e) The PREA Manager shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The PREA Coordinator may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the inmate shall be notified and provided a date by which a decision will be made.

(f) At any level of the process, including the appeal, if the inmate does not receive a response within the allotted time, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

(g) Inmates may be disciplined for filing a false grievance.

115.52(b): Policy 609.4 PREA Additional Provisions for Grievances Related to Sexual abuse mandates that Inmates may submit a grievance regarding an allegation of sexual abuse at any time. Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

115.52(c): Policy 609.4 PREA Additional Provisions for Grievances Related to Sexual abuse mandates that grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint.

115.52(d): Policy 609.4 PREA Additional Provisions for Grievances Related to Sexual abuse mandates that, (e) The PREA Manager shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The PREA Coordinator may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the inmate shall be notified and provided a date by which a decision will be made.

Agency reports that In the past 12 months, no grievances were filed that alleged sexual abuse.

In the past 12 months, no grievances alleging sexual abuse that reached final decision within 90 days after being filed.

The PAQ response indicates that The agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made.

Policy 609.4 only states that if an extension is granted, the inmate shall be notified and provided a date by which a decision will be made. Policy is non-compliant with the PREA Standard.

Agency to amend Policy 609.4 response to Standard provision 115.52(d)-6 to include the PREA mandate that states: "The agency always notifies an inmate in writing when

the agency files for an extension, including notice of the date by which a decision will be made." To comply with the PREA Standard.

115.52(e): Policy 609.4 PREA Additional Provisions for Grievances Related to Sexual abuse mandates that: Third parties,-including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing such grievances and to file such grievances on behalf of inmates if the inmate agrees to have the grievance filed on his/her behalf. Staff members who receive a grievance filed by a third party on behalf of an inmate shall inquire whether the inmate wishes to have the grievance processed and shall document the inmate's decision.

Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint

Agency reports that grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline.

DURING THE ONSITE, AUDITOR TO CONDUCT THE FOLLOWING:

SIGNAGE OBSERVATION -

During the Onsite Audit review, auditor observed PREA posters in English and Spanish located in each housing unit posted next to the phones which provides SAFEQUEST PREA hotline access to inmates via dialing #93 which is confidential and free. PREA Signage is also posted throughout the facility in areas where inmates and staff work to include intake and booking where inmates are also provided the inmate handbook and END THE SILENCE brochures which provide inmates with reporting information and contact numbers. PREA posters are also available at visiting booth access for 3rd Party visiting access.

3RD PARTY POSTING -

Auditor's observation of PREA Posters throughout the facility verifies all posters are in English and Spanish with the same information in both languages to include 3rd Party instructions.

On 11/5/2024 at 9:44 am, auditor contacted SAFEQUEST Solano via outside call for 3rd Party testing. Auditor reached the answering service who took the call and transfer to Advocate was initiated. The Advocate took the call, requested info to inform Program Director in order to report 3rd Party Test to Solano County Claybank Facility Commander. On 11/7/24, auditor contacted the PREA Compliance Manager to see if SAFEQUEST has contacted the Solano County Claybank Facility Commander.

The PREA Compliance Manager indicated that he was not informed that the Commander recieved the call but would followup. To date, auditor has not received followup information from the PREA Compliance Manager.

1. Agency to followup regarding the 3rd Party Testing on 11/5/24 to verify Agency's receipt of the 3rd Party Testing call and inform auditor of the call status.

115.52(f): The agency has a policy and established procedures for filing an

emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. Policy 609.4.1 Emergency Grievances Related to Sexual Abuse mandates that:

The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours.

Agency Reports that no emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months.

The supervisor shall refer the grievance to the PREA Manager and PREA Coordinator, who will investigate and issue a final decision within five calendar days. Upon receipt of the emergency grievance, the PREA Manager and PREA Coordinator shall notify the Facility Commander.

Agency reports that no grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days.

115.52(g): Policy 609.4 PREA Section (g) mandates that inmates may be disciplined for filing a false grievance. In the past 12 months, no inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.52(d), 115.52(e) and corrective action is required.

Corrective Action Recommended:

115.52(d): The PAQ response indicates that The agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made.

Policy 609.4 only states that if an extension is granted, the inmate shall be notified and provided a date by which a decision will be made. Policy is non-compliant with the PREA Standard.

1. Agency to amend Policy 609.4 response to Standard provision 115.52(d)-6 to include the PREA mandate that states: "The agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made." To comply with the PREA Standard.

115.52(e): On 11/5/2024 at 9:44 am, auditor contacted SAFEQUEST Solano via outside call for 3rd Party testing. Auditor reached the answering service who took the call and transfer to Advocate was initiated. The Advocate took the call, requested info to inform Program Director in order to report 3rd Party Test to Solano County Claybank Facility Commander. On 11/7/24, auditor contacted the PREA Compliance Manager to see if SAFEQUEST has contacted the Solano County Claybank Facility Commander. The PREA Compliance Manager indicated that he was not informed that the Commander recieved the call but would followup. To date, auditor has not

received followup information from the PREA Compliance Manager.

1. Agency to followup regarding the 3rd Party Testing on 11/5/24 to verify Agency's receipt of the 3rd Party Testing call and inform auditor of the call status.

Corrective Action Completion 12/17/2024 :

115.52(d): Agency amended Policy 609.4 Additional Provisions for Grievances Related to Sexual Abuse - Section (e) to mandates that:

"(e) The PREA Manager shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The PREA Coordinator may grant an extension of up to 70 days if reasonable to make an appropriate decision. This office shall notify the incarcerated person in writing when an extension is filed, including notice of the date by which a decision will be made."

The amended narrative meets the 115.52(d) Standard provision.

115.52(e): On 11/5/2024 at 9:44 am, auditor contacted SAFEQUEST Solano via outside call for 3rd Party testing. Auditor reached the answering service who took the call and transfer to Advocate was initiated. The Advocate took the call, requested info to inform Program Director in order to report 3rd Party Test to Solano County Claybank Facility Commander. On 11/7/24, auditor contacted the PREA Compliance Manager to see if SAFEQUEST has contacted the Solano County Claybank Facility Commander. The PREA Compliance Manager indicated that he was not informed that the Commander received the call but would followup. 12/2/24, the PREA Compliance Manager followed up with the Program Director and was informed that the Advocate provided the Program Director with referral information for response to two state prisons instead of Solano County Jail Claybank Facility. Auditor was informed that Advocate training was initiated and a second 3rd Party Test was requested by the PREA Compliance Manager.

On 12/6/24, auditor contacted SAFEQUEST Crisis Hotline and connected with the answering service who took auditor information to initiate the 3rd Party Test. The answering service immediately referred the auditor to the Executive Director, who informed the auditor that he would immediately connect the call with Solano CJ Claybank Facility to report to the Facility Commander that a 3rd Party Test for Mock reporting of sexual abuse has been initiated by the auditor to complete the 3rd party test. On 12/6/24, the PREA Compliance Manager e-mailed the auditor to inform that the Solano County Jail Claybank PREA Compliance Manager received the message from SAFEQUEST Program Director to inform the Agency that the second 3rd Party Test was completed and the Claybank facility has been notified.

The agency/facility has met the requirements of Standard provision(s) 115.52(d),

	<p>115.52(e) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.52.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.53(a): Policy 606.8 PREA mandates that a victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Office shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Office, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented.</p> <p>Inmate Rule Book pg 31 outlines the different levels of emotional support and advocacy available to inmates. PREA Zero-Tolerance Posters both in English & Spanish have been posted in all housing units and throughout the facility. PREA Brochures are provided to inmates during intake and are in both English and Spanish.</p> <p>Inmate Rule Book pages 30 & 34 provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations and access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.</p> <p>Interview with Inmate Interview Questionnaire indicates that during the Onsite Audit 14 Random Inmates and 5 targeted inmates were interviewed. Only 3 inmates responded to interview questions asking if they knew there were services available outside the facility for dealing with sexual abuse if they needed it. Two of the 3 inmates responded SAFEQUEST. The other inmate responded RAPE CRISIS CENTER, but could not provide any details such as location or what services it provided. The sole inmate who reported sexual abuse was released from custody prior to the completion of the investigation. Facility reported and auditor verified that no inmates were housed at Claybank Facility during the Onsite Audit who reported sexual abuse. Auditor conducted 3rd Party test of through SAFEQUEST on 11/5/24 via contact with answering service and contact with advocate. advocate took call requested additional information and provided emotional support information to the auditor. The Agency is not informed of the emotional support call request as the emotional</p>

support requested by inmate is confidential.

DURING THE SITE REVIEW, AUDITOR TO OBSERVE THE FOLLOWING:

SIGNAGE - During the Onsite Audit review, auditor observed PREA posters in English and Spanish located in each housing unit posted next to the phones which provides SAFEQUEST PREA hotline access to inmates via dialing #93 which is confidential and free. PREA Signage is also posted throughout the facility in areas where inmates and staff work to include intake and booking where inmates are also provided the inmate handbook and END THE SILENCE brochures which provide inmates with reporting information and contact numbers. PREA posters are also available at visiting booth access for 3rd Party visiting access.

TESTING ACCESS TO OUTSIDE EMOTIONAL SUPPORT SERVICES -

Auditor conducted 3rd Party test of through SAFEQUEST on 11/5/24 via contact with answering service and contact with advocate. advocate took call requested additional information and provided emotional support information to the auditor.

The Agency is not informed of the emotional support call request as the emotional support requested.

PROCESSES FOR SENDING AND RECEIVING MAIL (MAIL DROP BOXES/ MAILROOM) -

Interview of staff responsible for inmate mail process indicates that inmates with no funding are provided a welfare pack once a week which contains pen, paper, 2 envelopes, bar of soap, toothbrush and toothpaste.

REGULAR OUTGOING MAIL - The floor officer searches inmate mail envelopes in the inmate's presence, for contraband. Contraband is identified as anything that could hurt staff or inmates, escape information or information that could cause someone else harm. Envelope is then sealed, staff places their call-sign on the envelope along with a stamp and places in the Inmate Mail bag. Inmate Mail bag is brought to the visiting lobby to be picked up by official Postal Carrier.

CONFIDENTIAL MAIL - Inmate shows open envelope to staff for review, then places the letter in the envelope and seals in presence of officer. The officer initials envelope and puts their call-sign on the letter. Officer brings letter to visiting lobby where it is stamped "Inmate Mail" and picked up by official Postal Carrier.

INCOMING MAIL - Mail is opened and searched, scanned letter. Postage stamp is removed, then provided to the inmate.

115.53(b): Agency indicates that The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. This information is in the End the Silence Brochure provided to inmates at intake, the Inmate Rulebook and located on IPAD Tablets and PREA posters located throughout the facility.

Interview with Inmate Interview Questionnaire indicates that he is aware that discussions with people from the Crisis Hotline remains private as communications are considered confidential and toll free

The sole inmate who reported sexual abuse was released from custody prior to the completion of the investigation. Facility reported and auditor verified that no inmates

were housed at Claybank Facility during the Onsite Audit who reported sexual abuse SAFEQUEST contract July 2021 - June 2024 provided to auditor is non-compliant with Standard provision 115.51(b). Agency to obtain a renewal MOU contract with SAFEQUEST which is at least effective throughout the PREA Audit.

On 10/16/24, Agency provided auditor with MOU entered into between the Solano County Sheriff's Office and SAFEQUEST Solano, Inc. The Term of the MOU shall take effect 7/1/2024 and remain in effect until 6/30/ 2027. MOU has been uploaded to the Supplemental File.

115.53(c): Agency maintains a current SafeQuest MOU 2021 - 2024 to provide emotional support services related to sexual abuse. SafeQuest responds to anonymous callers and provides emotional support and reporting sexual abuse, sexual harassment or retaliation to the jail if agreed to by the caller. PREA posters with access phone hotline, rule book with contact information and information on reporting guidance is available to inmates and 3rd parties.

Agency provides Emotional Support via SAFEQUEST contract term of July 2021 - June 2024 is non-compliant with 115.51(b) as it has expired. Agency to obtain a renewal MOU contract with SAFEQUEST which is at least effective throughout the PREA Audit.

RESPONSE: On 10/16/24, Agency provided auditor with MOU entered into between the Solano County Sheriff's Office and SAFEQUEST Solano, Inc. The Term of the MOU shall take effect 7/1/2024 and remain in effect until 6/30/ 2027. MOU has been uploaded to the Supplemental File.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.53(a) and corrective action is required.

Corrective Action Recommended:

115.53(a): Auditor conducted 3rd Party test of through SAFEQUEST. Auditor awaits response through the agency.

Corrective Action Completion 11/5/24 :

115.53(a): Auditor conducted 3rd Party test of through SAFEQUEST on 11/5/24 via contact with answering service and referral contact with advocate. Advocate took call requested additional information and provided the types of emotional support provided inmates to the auditor. The Agency is not informed of the emotional support call request as the emotional support requested by inmate is confidential.

The agency/facility has met the requirements of Standard provision(s) 115.53(a) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.53.

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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.54(a): The Agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment through their website, PREA signs and Inmate Rule Book. Website: https://www.solanocounty.com/depts/sheriff/prea.asp or https://www.solanocounty.com/depts/sheriff/custody_division/prea.asp.</p> <p>10/8/24, Auditor initiated 3rd Party test using Safequest Solano outside call (866) 487-7233 and reached the answering service who took the call, obtained contact information and transferred me to a Safequest Advocate in order to forward information regarding 3rd Party mock test of assault of harassment at the Solano CJ Claybank facility. On 10/15/24, the PREA Compliance Manager indicated the 3rd Party Test call was received from the SAFEQUEST Program Director to verify the PREA mock test of assault at the Solano CJ Claybank Facility was recieved by the Facility Commander.</p> <p>10/8/24, Auditor initiated 3rd Party test using Safequest Solano outside call (866) 487-7233 and reached the answering service who took the call, obtained contact information and transferred me to a Safequest Advocate in order to forward information regarding 3rd Party mock test of assault of harassment at the Solano CJ Claybank facility. On 10/15/24, the PREA Compliance Manager indicated the 3rd Party Test call was received from the SAFEQUEST Program Director to verify the PREA mock test of assault at the Solano CJ Claybank Facility was recieved by the Facility Commander.</p> <p>AUDITOR TO OBSERVE SIGNAGE THROUGHOUT THE FACILITY -</p> <p>During the Onsite Audit review, auditor observed PREA posters in English and Spanish located in each housing unit posted next to the phones which provides SAFEQUEST PREA hotline access to inmates via dialing #93 which is confidential and free. PREA Signage is also posted throughout the facility in areas where inmates and staff work to include intake and booking where inmates are also provided the inmate handbook and END THE SILENCE brochures which provide inmates with reporting information and contact numbers. PREA posters which have narrative instructions regarding 3rd Party Reporting are also available at visiting booth access for 3rd Party visiting access.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.54.</p>

115.61	Staff and agency reporting duties
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 1481 999">115.61(a): Policy 606 PREA pg 5 mandates that inmates may report incidents anonymously or to any member they choose. In addition, they may report member neglect or violation of responsibilities that may have contributed to sexual abuse, sexual harassment or retaliation. any member who becomes aware of an incident of sexual abuse, sexual harassment, or retaliation against inmates or members shall immediately notify a supervisor, who will forward the matter to the appropriate PREA Manager and the PREA Coordinator (28 CFR 115.61). Members may also privately report sexual abuse and sexual harassment of inmates (e.g., report to the Facility Commander) (28 CFR 115.51; 15 CCR 1029). Inmates may report incidents anonymously or to any member they choose. In addition, they may report member neglect or violation of responsibilities that may have contributed to sexual abuse, sexual harassment or retaliation. If there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Facility Commander shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Facility Commander shall ensure that the notification has been documented (28 CFR 115.63).</p> <p data-bbox="256 1010 1481 1167">Interview with Random Sample of Staff indicates that staff have been trained on policy and procedure for reporting any information related to an inmate sexual abuse through the housing sergeant or immediate supervisor. They can also report privately to the Shift Lt or PREA Coordinator.</p> <p data-bbox="256 1205 1481 1323">115.61(b): Policy 606 PREA pg 5 mandates that reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).</p> <p data-bbox="256 1335 1481 1491">Interview with Random Sample of Staff indicates that staff have been trained on policy and procedure for reporting any information related to an inmate sexual abuse through the housing sergeant or immediate supervisor. They can also report privately to the Shift Lt or PREA Coordinator.</p> <p data-bbox="256 1529 1481 1686">115.61(c): Policy 606 PREA mandates that medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other members as necessary to inform about security or management decisions.</p> <p data-bbox="256 1697 1481 1944">Interview with Medical and Mental Health Staff indicates that at initiation of services to an inmate, medical and mental health disclose the limitations of confidentiality and duty to report information regarding sexual abuse or sexual harassment to designated supervisor or official immediately upon learning of it through medical nurse who has inmates sign a medical release form during Intake that provides this information to them as mandatory reporters.</p> <p data-bbox="256 1982 1481 2056">115.61(d): Policy 606 PREA mandates that the health authority or mental health staff shall obtain informed consent from inmates before reporting information to members</p>

	<p>about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate is under the age of 18 (28 CFR 115.81). Agency does not house persons under 18 years of age, however, should a victim occur under age of 18 years, Child Protection Services (CPS) is notified. Adult Protective Services are notified for someone considered vulnerable adult under state or local law.</p> <p>Interview with Facility Commander indicates that response under state or local law regarding a sexual abuse allegation to those under 18 years of age is Child Protective Services (CPS), and Vulnerable Adult Elder Abuse. Agency does not house anyone under the age of 18 years old.</p> <p>Interview with the PREA Coordinator indicates that no one under the age of 18 years housed in the Solano CJ. Vulnerable adult statute mandates that agency informs Adult Protective Services (APS).</p> <p>115.61(e): Policy 606 PREA mandates that the facility shall provide information to all visitors or third parties on how they may report any incident, or suspected incident of sexual abuse, or sexual harassment to a member (28 CFR 115.54; 15 CCR 1029). Threats or allegations of sexual abuse, sexual harassment, or retaliation, regardless of the source, shall be documented and referred for investigation.</p> <p>Interview with Facility Commander indicates that all allegations of sexual abuse and sexual harassment, including those from third-party and anonymous sources, are reported directly to designated facility investigators.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.61.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62(a): Policy 608 PREA mandates that the agency has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all inmates from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment. Agency has developed a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators, and facility management to an incident of sexual abuse. The plan must also outline the Office's approach to identifying imminent sexual abuse toward inmates and preventing and detecting such incidents (28 CFR 115.11; 28 CFR 115.65; 28 CFR 115.62). Agency states that In the past 12 months, no inmate within the agency or facility was found</p>

	<p>to be a subject to a substantial risk of imminent sexual abuse. Interview with Agency Head designee indicates that inmate is subject to a substantial risk of him and sexual abuse. The protective action that we should be taken is ensuring that the end made it safe from that thread. Move the inmate victim, and re-house, if warranted, or move the perpetrator and ensure a keep-away status is documented.</p> <p>Interview with Agency Head or designee indicates that substantial risk of eminent sexual abuse, the victims to be moved from the cell. Medical and mental health is called for emotional support and treatment and an investigation is initiated.</p> <p>Interview with Facility Commander or Designee indicates that upon learning that Amy, was subject to imminent sexual abuse, all factors are taken into consideration. We address any compliance issues or areas. We utilize the classification process to move the victim from Risk and re-house. The perpetrator is removed. Also investigation is conducted.</p> <p>Interview with Random Sample of Staff indicates that once Stan, learns roommate is at risk sexual abuse, they separate the victim and the perpetrator. Both are put in separate holding cells with no access to water. Staff will call the mediate supervisor and notify classification for housing immediately.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.62.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.63(a): Policy 606 PREA mandates that if there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Facility Commander shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Facility Commander shall ensure that the notification has been documented (28 CFR 115.63). Agency reports that in the past 12 months, the facility has not received any notices that an inmate was abused while confined at another facility.</p> <p>115.63(b): Policy 606 PREA mandates that if there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Facility Commander shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Facility Commander shall ensure that the notification has been documented (28 CFR 115.63).</p> <p>115.63(c): Policy 606 PREA mandates that if there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Facility Commander shall notify the head of that facility as soon as possible but not later than</p>

	<p>72 hours after receiving the allegation. The Facility Commander shall ensure that the notification has been documented (28 CFR 115.63).</p> <p>Agency reports that in the past 12 months, the facility has not received any notices that an inmate was abused while confined at another facility.</p> <p>115.63(d): Policy 606 PREA mandates that the agency has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all inmates from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment. Agency reports that in the past 12 months, there have been no allegations of sexual abuse the facility received from other facilities.</p> <p>Interview with Agency Head or designee indicates that another agency refers allegations of sexual abuse, sexual harassment that occurred within one of our facilities. The designated point of contact is Apria coordinator. Once we receive the allegations will immediately conduct investigation. Agency head unable to recall an example of such allegations being reported from another facility or agency.</p> <p>Interview with Facility Commander or Designee indicates that whenever Silletti receives allegations from another facility or agency, that an incident of sexual abuse or sexual harassment occurred in our facility we merely notify the Apria coordinator and investigate the validity of the claim. The Facility Commander could not recall examples of another facility or agency reporting such allegations.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.63.</p>
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115.64 Staff first responder duties	
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.64(a): Policy 606 PREA mandates that if an allegation of inmate sexual abuse is made, the first officer to respond shall (28 CFR 115.64): (a) Separate the parties. (b) Request medical assistance as appropriate. If no qualified health care or mental health (c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence. (d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g., washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating). (e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing. (f) Determine</p>

whether the alleged perpetrator should be administratively segregated or administratively transferred during the investigation. Agency reports that in the past 12 months, no allegations that an inmate was sexually abused were reported. Interview with Security Staff and Non-Security Staff First Responders indicates that security staff separates alleged victim and abuser placing them in holding cell with no running water. Staff requests that alleged abuse not take any action that could destroy physical evidence, immediately notify the supervisor, medical and mental health and seal the crime scene. Non-security staff members separate the alleged victim and abuser, keep victim safe and contact the immediate supervisor. The only inmate who reported sexual abuse was released from custody prior to the Onsite Audit and completion of the investigation. The outcome of the investigation was determined to be unfounded.

115.64(b): Policy 606 PREA mandates that if the first responder is not a correctional officer, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a correctional officer. Agency reports that there were no instances where a non-security staff member was the first responder and no allegations where the allegation was responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence. Interview with Security Staff and Non-Security Staff First Responders indicates that security staff separates alleged victim and abuser placing them in holding cell with no running water. Staff requests that alleged abuse not take any action that could destroy physical evidence, immediately notify the supervisor, medical and mental health and seal the crime scene. Non-security staff members separate the alleged victim and abuser, keep victim safe and contact the immediate supervisor. Interview with Random Sample of Staff indicates that once staff has been alerted that an inmate has allegedly been victim of sexual abuse, the first responder separates the victim and perpetrator, places both inmates in separate Z-mods with no running water, contact classification, file a report, contact medical and mental health and contact the supervisor.

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.64.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>115.65(a): Policy 606.4 PREA Coordinator mandates that The PREA coordinator's responsibilities shall include: (a) Developing a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators, and facility management to an incident of sexual abuse. The plan must also outline the Office's approach to identifying imminent sexual abuse toward inmates and preventing and detecting such incidents (28 CFR 115.11; 28 CFR 115.65; 28 CFR 115.62).</p> <p>Agency provided the Coordinated Response for the Claybank Detention Facility written in 8/17/23, to the Supplemental File.</p> <p>Interview with the Facility Commander or designee indicates that facility has a plan to coordinate actions among staff first responders, medical and mental health, practitioners, investigators, and facility leader ship in response to the incident of sexual abuse. The coordinated response mandates the facility be notified and involved in the response.</p> <p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.65.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.66(a): Agency has provided auditor with the Correctional Supervisors 2022 - 2025 MOU Unit 14. pdf and Correctional Officers 2022 - 2025 MOU Unit 13 , Solano County Deputy Sheriff's Association 2022 - 2025 MOU UNIT 4, Solano County Deputy Sheriff's Association 2022 - 2025 MOU UNIT 3. There is no narrative in either of the Collective Bargaining agreements that govern:</p> <p>(1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or</p> <p>(2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.</p> <p>Agency last entered into bargaining agreements with side letters during the last PREA Audit in 2023 with term of 2022 to 2025 and is still in effect.</p> <p>Interview with Agency Head or designee indicates that PREA compliant collective bargaining agreements are good til the end of 2025.</p> <p>115.66(b): Auditor is not required to audit this provision.</p>

	<p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.66.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.67(a): Policy 606 PREA mandates that All inmates and members who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation. Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment, or reassignment of the victim or alleged perpetrator to another housing area, and support services for inmates or members who fear retaliation, shall be utilized (28 CFR 115.67; 15 CCR 1029). If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67). Agency has designated the PREA Compliance Manager to monitor for possible retaliation within the Claybank Facility.</p> <p>115.67(b): Policy 606 PREA mandates that Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment, or reassignment of the victim or alleged perpetrator to another housing area, and support services for inmates or members who fear retaliation, shall be utilized (28 CFR 115.67; 15 CCR 1029). If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67). Agency reports there have been no instances of retaliation occurring in the past 12 months.</p> <p>Interview with Agency Head indicates that Inmates and staff are protected from retaliation through Policy general orders. If inmate reports retaliation, the appropriate decision for protection is identified to protect the victim.</p> <p>Interview with Facility Commander or Designee indicates that Riley is a sexual Buser sexual-harassment different versions. You take a check inmates and staff from Rudy retaliation includes zero retaliation policy. How's victims and suspects separately. Transfer victims of suspects two different facilities. Indoor housing. Provide emotional support for victims.</p> <p>Interview with Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) indicates that role of the retaliation monitor place and preventing retaliation against inmates and staff report sexual abuse or sexual</p>

harassment or who cooperate with sexual abuse or sexual harassment is moving people who file complaints and rehousing the perpetrator for the safety of other inmates.

No inmates were housed in Segregated Housing at the Claybank Facility (for risk of sexual victimization/who allege to have suffered sexual abuse)

Inmate who Reported a Sexual Abuse was released from custody prior to completion of the sexual abuse investigation and prior to the Onsite Audit. No interview was conducted.

115.67(c): Policy 606 PREA mandates that The Facility Commander or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of inmates or members who report sexual abuse or sexual harassment, as well as inmates who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider inmate disciplinary reports, housing or program changes, negative member performance reviews, or reassignment of members. Monitoring may continue beyond 90 days if needed. Inmate monitoring shall also include periodic status checks. The Facility Commander should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that members who pose a threat of retaliation are not entrusted with monitoring responsibilities.

Interview with Facility Commander or Designee indicates that when retaliation is suspected I would take immediate steps to investigate.

Interview with Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) Indicates that when looking for signs which detects possible inmate retaliation, the monitor reviews the classification file, speaking with inmate face to face, Retaliation against staff, one will look for changes in work assignments and work schedules. Length of monitoring is a minimum of 90-days, or as long as necessary.

115.67(d): Policy 606 PREA mandates that The Facility Commander or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of inmates or members who report sexual abuse or sexual harassment, as well as inmates who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider inmate disciplinary reports, housing or program changes, negative member performance reviews, or reassignment of members. Monitoring may continue beyond 90 days if needed. Inmate monitoring shall also include periodic status checks. The Facility Commander should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that members who pose a threat of retaliation are not entrusted with monitoring responsibilities.

Interview with Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) indicates that when looking for signs which detects possible inmate retaliation, the monitor reviews the classification file, speaking with

	<p>inmate face to face periodic checks, Retaliation against staff, one will look for changes in work assignments and work schedules.</p> <p>115.67(e): Policy 606 PREA mandates that If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67). Interview with Agency Head or designee indicates that if reporting, movement and appropriate decision for protection is identified - protect the victim. Interview with Facility Commander or Designee indicates that different measures taken to protect inmates and staff from retaliation includes zero-retaliation policy, separate and rehouse victim & suspect, transfer to another facility and provide emotional support for victims.</p> <p>115.87(f): Auditor is not required to audit this provision.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.87.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.68(a): Policy 18.001 PREA mandates that inmates at high risk for sexual victimization shall not be placed in involuntary separated 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. Inmates may be held in involuntary protective custody for less than 24 hours while an assessment is completed. Agency reports that no inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. No inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement. Agency states that if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>Interview with Facility Commander or Designee indicates that policy prohibits, placing inmates in high risk for sexual victimization, or who have a ledge, sexual abuse and involuntary segregated housing in lieu of other housing areas, unless in assessment has determined, there are no available alternative means of separation</p>

	<p>from potential abusers. Temporary administrative separation (Ad Sep) cases are reviewed every 7 days. If placed in involuntary segregation until classification can find secure housing. Interviewee was unable to describe any recent circumstances in which segregated housing was used to protect an inmate who was alleged to have suffered sexual abuse within the past 12 months.</p> <p>Interview with Staff who Supervise Inmates in Segregated Housing indicates that when it meets our place to serve you to housing for protection from sexual abuse, or after having a ledge sexual abuse, they still have, they still have access to the following:</p> <ul style="list-style-type: none"> - Programs - Priveleges - Education - Work opportunities <p>If the facility restricts, access to programs, privileges, education, or work opportunities, the facility documents, the opportunities that have been limited, the duration of limitations, and the reasons for such limitations. I miss placed in voluntary secure housing only until alternative means of separation from likely abusers can be arranged. These inmates are separated from all threats and dangers. Temporary administrative separation (Ad Sep) cases are reviewed every 7 days Gen Pop are reassessed every 30 days.</p> <p>Agency and PREA Coordinator indicates there are no inmates in segregated housing for risk of sexual victimization/who allege to have suffered sexual abuse housed at the Claybank Facility.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.68(a).</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.71(a): Policy 606.10 PREA Sexual Abuse and Sexual Harassment Investigations mandates that an administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-</p>

approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

115.71(b): Policy 606.10 PREA mandates that only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71). Agency provided auditor with copies of the NIC PREA Investigation of Sexual Abuse in a Confinement Setting course certificates of completion for 129 investigators identified as assigned to investigate sexual abuse cases. Agency has trained all deputies in the NIC course but do not use all deputies for the investigations. Agency provided Investigator NIC certification certificates for Standard provision 115.34(c) for the Pre-Audit Questionnaire during the Pre-Audit phase.

Interview with Investigative Staff indicates that they receive investigative training specific to conducting sexual abuse investigations in confinement settings through National Institute of Corrections (NIC) online training, where the following topics are covered:

- Investigative Techniques
- Gathering Evidence
- Miranda & Garrity warnings
- Interviewing victims/suspects
- Sexual abuse evidence collections in confinement settings
- Criteria and evidence required o substantiate a case for administrative or prosecution referral

115.71(c): Policy 606.10 PREA mandates that an administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

Interview with Investigative Staff indicates that the first steps in initiating an investigation includes:

- Custody staff contacts dispatch
- Patrol is dispatched and investigations is notified within 1-2 hours
- Interviewing witnesses and suspects,
- Review and video,
- Obtaining evidence,
- Review past reports, and parties invoiced history.

Circumstantial evidence the investigators would be responsible for gathering in an investigation of an incidence of sexual abuse includes:

- Statements from involved parties
- Video and phone recordings
- Physical and digital evidence

115.71(d): Agency reports that when the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Interview with Investigative Staff indicates that when investigators discover that a prosecutable crime may have taken place, they consult with prosecutors before conducting compelled interviews.

115.71(e): Policy 606.10 PREA mandates that all administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Inmates alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115. 71). Inmates alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115. 71).

Interview with Investigative Staff indicates that credibility of an alleged victim, suspect, or witness is judged on a case by case basis without considering custody status. We do not require an inmate who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation. Cases are referred for prosecution when the allegation has been substantiated or crime has been identified.

Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.71(f): Policy 606.10 PREA mandates that administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Interview with Investigative Staff Internal Affairs, who conduct administrative investigations to determine whether staff actions or failures to act contributed to the sexual abuse:

- Refers details of complaint
- Reviews video footage
- Mirror criminal investigation
- Conduct Lybarger interview for administrative findings policy & procedure (Deputies Policy 902 & Correctional Officers Policy 606)

Administrative investigations are documented in written reports which include:

- Recorded interviews
- Criminal Investigation which supersedes the Internal Affairs Investigation

AUDITOR TO DOCUMENT RECORD STORAGE OBSERVATION DURING SITE REVIEW
RECORD STORAGE -:

Interview with Internet Technology (IT) staff indicates that Intake, Classification, Investigative and Medical documentation are computerized documents:

- Determined safeguards regarding access and security of gathered information
- County user has access credentials - Permission granted levels to access specific documents
- Locked security permissions - Security permission level settings
- Settings made by Business Units or IT, depending on level of access needed
- Must have permission to access the system based upon specific details
- Read only for Business Access - Electronic systems that require permissions: (ATIMS, RIMS & SHAREPOINT)

115.71(g): Policy 606 PREA mandates that administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Interview with Investigative Staff indicates that criminal investigations are documented. Information contained in report is as follows:

- Interview with Investigative Staff indicates that the first steps in initiating an investigation includes:
 - Custody staff contacts dispatch
 - Patrol is dispatched and investigations is notified within 1-2 hours
 - Interviewing witnesses and suspects,
 - Review and video,
 - Obtaining evidence,
 - Review past reports, and parties invoiced history.
- Circumstantial evidence the investigators would be responsible for gathering in an investigation of an incidence of sexual abuse includes:
 - Statements from involved parties
 - Video and phone recordings
 - Physical, testimonial, documentary and digital evidence

Interview with Investigative Staff indicates that when investigators discover that a prosecutable crime may have taken place, they consult with prosecutors before conducting compelled interviews.

Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.17(h): Policy 606.10 PREA mandates that If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115. 71). Agency reports that no substantiated allegations of conduct that appear to be criminal were referred for prosecution since the last PREA audit.

Interview with Investigative Staff indicates that credibility of an alleged victim, suspect, or witness is judged on a case by case basis without considering custody status. We do not require an inmate who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation. Cases are referred for prosecution when the allegation has been substantiated or crime has been identified.

Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. No interview conducted.

115.71(i): Policy 606.15 Records mandates that The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

115.71(j): Policy 606.10 mandates that The departure of the alleged abuser or victim from the employment or control of the facility or Office shall not provide a basis for terminating an investigation (28 CFR 115.71).

Interview with Investigative Staff indicates that investigation proceeds when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct.

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

115.71(l): If the investigation is referred to another agency for investigation, the Office shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through (e). The referral shall be documented. The Office shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71) If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115. 71).

Interview with Facility Commander or Designee indicates that if an outside agency investigates allegations of sexual abuse, the facility shall remain informed of the progress of a sexual abuse investigation as the PREA Coordinator would remain in touch with the investigative process.

Interview with the PREA Coordinator indicates that if an outside agency investigates allegations of sexual abuse, the facility remains informed of the progress of a sexual abuse investigation by requesting updates from the investigating agency.

Interview with the PREA Compliance Manager indicates that if an outside agency investigates allegations of sexual abuse, the facility remains informed of the progress of a sexual abuse investigation.

Interview with the Investigative Staff Indicates that when an outside agency investigates an incident of sexual abuse in this facility, investigators cooperate with the investigations and help out with whatever is needed, act as liaison.

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.71.

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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.72(a): Policy 606 PREA mandates that all completed written investigations shall be forwarded to the facility PREA Manager and PREA Coordinator. The PREA Coordinator shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115. 71; 28 CFR 115. 72).</p> <p>Interview with Investigative Staff indicates that facility conduct sexual abuse incident reviews the facility prepares report his findings from the reviews, including any determinations and any recommendations for improvement.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.72.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.73(a): Policy 606.10.2 PREA REPORTING TO INMATES indicates that The facility PREA Manager, PREA Coordinator or the authorized designee shall inform a victim inmate in writing whether an allegation has been substantiated, unsubstantiated or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the inmate. Agency reports that 2 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months and Of the alleged sexual abuse investigations that were completed in the past 12 months, 1inmate was notified, verbally or in writing, of the results of the investigation as the other inmate was released from custody prior to disposition.</p> <p>Interview with the Facility Commander or Designee indicates that the PREA Coordinator provides inmate with the determined outcome, substantiated, unsubstantiated or unfounded, in writing, at the conclusion of the investigation.</p> <p>Interview with Investigative Staff indicates that Agency procedures require an inmate</p>

who makes an allegation of sexual abuse must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded follow Euniel the preach coordinator provides the determination in writing to the inmate.

1 inmate reported sexual abuse within 12 months prior to the Onsite Audit. Inmate was released from custody prior to the Onsite Audit. auditor unable to conduct interview with this inmate.

115.73(b): N/A - Agency/Facility is responsible for conducting administrative and criminal investigations.

115.73(c): Policy 606.10.2 mandates that Policy 606 PREA mandates that the facility PREA Manager, PREA Coordinator or the authorized designee shall inform a victim inmate in writing whether an allegation has been substantiated, unsubstantiated or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the inmate. If a member is the accused (unless the Office has determined that the allegation is unfounded), the inmate shall also be informed whenever:

- (a) The member is no longer assigned to the inmate's unit or employed at the facility.
- (b) The Office learns that the member has been indicted or convicted on a charge related to sexual abuse within the facility.

If another inmate is the accused, the alleged victim shall, be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

All notifications or attempted notifications shall be documented. When notification is made while the inmate is in custody, the inmate will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

1 inmate reported sexual abuse within 12 months prior to the Onsite Audit. Inmate was released from custody prior to the Onsite Audit. auditor unable to conduct interview with this inmate.

115.73(d): Policy 606.10.2 mandates that If another inmate is the accused, the alleged victim shall, be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. All notifications or attempted notifications shall be documented. When notification is made while the inmate is in custody, the inmate will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

1 inmate reported sexual abuse within 12 months prior to the Onsite Audit. Inmate was released from custody prior to the Onsite Audit. auditor unable to conduct interview with the inmate.

115.73(e): Policy 606.10.2 mandates that If another inmate is the accused, the alleged victim shall, be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. All notifications or attempted notifications shall be documented. When notification is made while the inmate is in custody, the inmate will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

In the past 12 months, 2 notifications to inmates were documented pursuant to this

	<p>standard. 1 notification was provided to the victim who signed the notification. The second notification could not be provided to the 2nd victim as the inmate was released from custody before the investigation was completed.</p> <p>115.73(f). Auditor is not required to audit this provision.</p> <p>CONCLUSION Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.73.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.76(a): Policy 606.10 PREA mandates that members shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. All discipline shall be commensurate with the nature and circumstances of the acts committed, the member's disciplinary history, and the sanctions imposed for comparable offenses by other members with similar histories.</p> <p>115.76(b): Agency reports that In the past 12 months, no staff from the facility who have violated agency sexual abuse or sexual harassment policies. In the past 12 months, no staff from the facility have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76(c): Policy 606.10.1 PREA mandates that members shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. All discipline shall be commensurate with the nature and circumstances of the acts committed, the member's disciplinary history, and the sanctions imposed for comparable offenses by other members with similar histories. Agency reports that in the past 12 months, no staff from the facility have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).</p> <p>115.76(d): Policy 606.10.1 PREA mandates that all terminations for violations of sexual abuse or sexual harassment policies, or resignations by members who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies (28 CFR 115. 76). Agency reports that in the past 12 months, no staff from the facility have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p>

	<p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.76.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.77(a): Policy 606.11.1 mandates that any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with inmates. He/she shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115. 77). Agency reports that in the past 12 months, no contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates and no contractors or volunteers have been reported to law enforcement for engaging in sexual abuse on inmates.</p> <p>115.77(b): Policy 606.11.1 mandates that any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with inmates. He/she shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115. 77). Interview with Facility Commander indicates that violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the facility always prohibits further contact with inmates. Agency requires no access to the facility pending a positive resolution of the investigation. Should the investigation determine a PREA violation of sexual abuse or sexual harassment, the contractor or volunteer is prohibited to work in the facility.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.77.</p>

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>

115.78(a): Policy 15.003 Disciplinary Hearing and Basic Rules mandates that 1. Formal discipline requires an incident report be entered into the Inmate Management System (IMS). The supervisor will review reports for completeness and accuracy prior to posting into the Inmate Management System. If complete, the report will be approved by the appropriate supervisor and the officer shall post the report into the Inmate Management System. A hearing shall be scheduled within 72 hours of report entry, and a copy of the incident report and rights to a hearing will be given to the inmate(s) involved. The 72 hour time frame may be extended depending on the complexity of the issues and the need for more information. A hearing will be conducted by a Classification Officer. The hearing cannot be scheduled until 24 hours have elapsed from the time the inmate receives the report and rights to a hearing.

This will be documented in the computer. The inmate has the right to waive the 24-hour preparation period. This must also be documented. The officer will document all minor and major violations handled on a formal basis in the inmate management system. Discipline/Incident Reports prepared by staff members will include, but not limited to:

- a. Specific rules violated.
- b. A formal statement of the charge.
- c. An explanation of the event, which will include who was involved, what transpired, and the time and location of occurrence.
- d. Any unusual inmate behavior.
- e. Staff witness/inmate witness.
- f. Disposition of any physical evidence.
- g. Any immediate action taken including the use of force.
- h. Reporting staff members, date and time report is made.

In the past 12 months, no criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.

115.78(b): Policy 606.10.1 Investigative Findings mandates that members shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. All discipline shall be commensurate with the nature and circumstances of the acts committed, the member's disciplinary history, and the sanctions imposed for comparable offenses by other members with similar histories.

No sanctions have been imposed as the

Interview with Facility Commander indicates that inmates are subject to disciplinary sanctions following an administrative or criminal finding that the inmate engaged in inmate on inmate sexual abuse. The sanctions are proportionate to the nature and circumstances of the abuses committed, the inmates' current crimes, disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories. Mental disability or mental illness is considered when determining sanctions.

In the past 12 months, no criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.

115.78(c): Agency reports that 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. Policy 15.003(g)

Disciplinary Hearing and Basic Rules mandates that 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 for PREA incidents.

Interview with Facility Commander indicates that inmates are subject to disciplinary sanctions following an administrative or criminal finding that the inmate engaged in inmate on inmate sexual abuse. The sanctions are proportionate to the nature and circumstances of the abuses committed, the inmates' current crimes, disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories. Mental disability or mental illness is considered when determining sanctions.

In the past 12 months, no criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.

115.78(d): Agency reports that the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse and the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

Interview with Medical and Mental Health Staff indicates that the facility considers whether to offer these services to the offending inmate initially at the hospital and continued when returned to custody. Inmate is not required to participate as a condition of access to programming or other benefits.

115.78(e) Policy 15.003(H) Disciplinary Hearing and Basic Rules mandates that an inmate may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

115.78(f): Policy 15.003 Disciplinary Hearing and Basic Rules mandates that the Sheriff’s Office prohibits disciplinary action for a report of sexual abuse made in good faith and based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence to substantiate the allegation.

115.78(g): PAQ response to Standard provision 115.78(g)-1 indicates that the agency prohibits all sexual activity between inmates unless it is determined that the activity is not coerced.

CONCLUSION:
Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.78.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.81(a): N/A - Facility is not a Prison

115.81(b): N/A - Facility is not a Prison

115/81(a)/(c): Agency reports that all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner. Agency reports that In the past 12 months, 4% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. 10/28/24 - Wellpath Rape and Sexual Assault Policy uploaded to the Supplemental File which addresses responsibilities for Standard Provision 115.81.

Interview with Inmates who Disclose Sexual Victimization at Risk Screening indicates that he met with Mental Health practitioner same day he was in Intake and was interviewed regarding my disclosure of victimization when I was a teenager.

Interview with Staff Responsible for Risk Screening indicate that Intake staff refers inmate who suffered prior sexual victimization and reported same at intake is referred to Mental Health for meeting. Inmate is met with Mental Health practitioner within 72 hours of intake.

115.81(d): Policy 606.9(j) Examination, Testing and Treatment mandates that Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other members as necessary to inform about security or management decisions (28 CFR 115.81).

AUDITOR TO DOCUMENT RECORD STORAGE OBSERVATION DURING SITE REVIEW RECORD STORAGE -:

Interview with Internet Technology (IT) staff indicates that Intake, Classification, Investigative and Medical documentation are computerized documents:

- Determined safeguards regarding access and security of gathered information
- County user has access credentials - Permission granted levels to access specific documents
- Locked security permissions - Security permission level settings
- Settings made by Business Units or IT, depending on level of access needed
- Must have permission to access the system based upon specific details
- Read only for Business Access - Electronic systems that require permissions: (ATIMS, RIMS & SHAREPOINT)

115.81(e): Policy 608.9(i) mandates that The health authority or mental health staff shall obtain informed consent from inmates before reporting information to members about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate is under the age of 18 (28 CFR 115.81).

Interview with Medical and Mental Health Staff indicates that informed consent is obtained through a signed form during intake by medical staff. Agency does not house inmates under 18 years of age, informed consent forms are obtained at Juvenile Hall.

CONCLUSION

	Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.81.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.82(a): Agency indicates that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services to include that the nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Agency reports that there are medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.</p> <p>Interview with Medical and Mental Health Staff indicates that inmate victims of sexual abuse, receive timely and unimpeded access to emergency medical treatment and crisis intervention services. Services typically occur immediately. The nature and scope of the services are determined according to medical and mental health practitioners professional judgment.</p> <p>Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.</p> <p>115.82(b): Agency indicates that if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. Interview with Security Staff and Non-Security Staff First Responders indicate that they both described the actions they take as a first responder to an allegation of sexual abuse:</p> <p>Security Staff -</p> <ul style="list-style-type: none"> - Separate the alleged of victim and abuser. Place both in Zed with the running water turned off to reserve physical evidence - Contact Supervisor immediately - Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence - Requesting the alleged victim, not taking any actions that could destroy physical evidence - Ensuring that the abuser does not take any of the above actions that could destroy physical evidence - Immediately notify medical and mental health practitioners

Non-security staff -

- Separating the alleged of victim and abuser. Maintain victim in presence with responding staff.
- Contact immediate supervisor or custody staff
- Requesting the alleged victim, not taking any actions that could destroy physical evidence
- Immediately notify medical and mental health practitioners

115.82(c): Policy 606 PREA mandates that examination, testing, and treatment shall include the following (15 CCR 1206): (a) Forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SAN Es (28 CFR 115.21). (b) If requested by the victim, a victim advocate, a qualified office member, or a qualified community organization staff member shall accompany the victim through the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information, and referrals (28 CFR 115.21). (c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82). (d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided. (e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner. (f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner. (g) Victims shall be provided with 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 (28 CFR 115.83). (h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83). (i) The health authority or mental health staff shall obtain informed consent from inmates before reporting information to members about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate is under the age of 18 (28 CFR 115.81). (c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82). (d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided. (e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner. (f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a

timely manner. (g) Victims shall be provided with 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 (28 CFR 115.83). (h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83). (i) The health authority or mental health staff shall obtain informed consent from inmates before reporting information to members about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate is under the age of 18 (28 CFR 115.81). Interview with medical and mental health staff indicates that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis. Interview with Medical and Mental Health Staff indicates that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis. Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.82(d): Policy 606 (h) Examination, Testing and Treatment mandates that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).

CONCLUSION

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.82.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83(a): Policy 606.9 Examination, Testing and Treatment mandates the following (15 CCR 1206):</p> <p>(a) Forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21). (b) If requested by the victim, a victim advocate, a qualified office member, or a qualified community organization</p>

staff member shall accompany the victim through the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information, and referrals (28 CFR 115.21).

(c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).

(d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.

(e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner.

(f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner. (g) Victims shall be provided with 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 (28 CFR 115.83).

(h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).

(i) The health authority or mental health staff shall obtain informed consent from inmates before reporting information to members about prior sexual victimization that occurred somewhere other than an institutional setting, unless the inmate is under the age of 18 (28 CFR 115.81).

115.83(b): Agency reports that The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

Interview with Medical and Mental Health Staff indicates that evaluation and treatment of inmates who have been victimized entails informing custody staff once victimization has been discovered. Custody staff will send inmate to the hospital for SERT exam with investigator to maintain evidence and victim advocate for emotional support..

Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit.

115.83(c): The facility provides such victims with medical and mental health services consistent with the community level of care.

Interview with Medical and Mental Health Staff indicates that medical and mental health services are offered consistent with the community level of care.

115.83(d): Policy 606.9 (f) Examination, Testing and Treatment mandates that victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28

CFR 115.83). This shall be done in a timely manner.
 Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.83(e): Policy 606.9 (f) Examination, Testing and Treatment mandates that victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner.
 Interview with Medical and Mental Health Staff indicates that if pregnancy results from sexual abuse, while incarcerated, victims are given timely information, and access to all lawful pregnancy-related services as soon as possible upon knowledge of need.
 Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.83(f): Policy 606.9 (c & d) Examination, Testing and Treatment mandates that:
 (c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).
 (d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.
 Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.83(g): Policy 606.9 (h) Examination, Testing and Treatment mandates that:
 (h) treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).
 Inmate who reported a sexual abuse within the past 12 months was released from incarceration prior to the completion of the investigation and initiation of the Onsite Audit. Not interview conducted.

115.83(h): N/A - Facility is a Jail

CONCLUSION:
 Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.83.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.86(a): Policy 606.13 Incident Reviews mandates that an incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. The review should occur within 30 days of the conclusion of the investigation (28 CFR 115.86).

Agency reports that In the past 12 months, no criminal and/or administrative investigations of alleged sexual abuse were completed at the facility, excluding only "unfounded" incidents.

115.86(b) Policy 606.13 Incident Reviews mandates that an incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. The review should occur within 30 days of the conclusion of the investigation (28 CFR 115.86).

Agency reports that In the past 12 months, no criminal and/or administrative investigations of alleged sexual abuse were completed at the facility, excluding only "unfounded" incidents.

115.86(c): Policy 606.13 Incident Reviews mandates that the review team shall include upper-level management officials and seek input from line supervisors, investigators and qualified health care and/or mental health professionals, as appropriate.

Interview with the Facility Commander or designee indicates that -the facility has a sexual abuse incident review team. The team consist of upper level management officials and allow for input from line supervisors, investigators, and medical or mental health practitioners.

115.86(d): Policy 606.13 Incident Reviews mandates that the review team shall prepare a report of its findings, including any determinations made pursuant to this section and any recommendations for improvement. The report shall be submitted to the PREA Coordinator. The Facility Commander or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

Interview with the Facility Commander or Designee indicates that the incident review team uses information from the incident review with regards to safety, housing and security throughout the facility. The Incident Review Team considers Whether the incident or allegation was motivated by race, ethnicity, gender, identity, LGBTI inmates, and/or group dynamics at the facility. The team also examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. The team assesses the adequacy of staffing levels in that area during different shifts and assesses whether monitoring technology should be employed or augmented to supplement supervision by staff.

Interview with the PREA Compliance Manager indicates that upon completion of sexual abuse, incident reviews, the Incident Review Team prepares a report of its findings from the reviews to include any determinations and recommendations for improvement. The reports are forwarded to the Prior compliance manager for review, to determine any trends in the narrative. The reports are then uploaded to SharePoint, where the facility commander has access to the reports for review. After the facility commander has reviewed, a decision is made as to whether any information that needs to be addressed is worked out with the PREA Coordinator in

the event policy or updates within the facility upgrades or staff training or changes are required.

Interview with the Incident Review Team indicates that the Incident Review Team considers Whether the incident or allegation was motivated by race, ethnicity, gender, identity, LGBTI inmates, and/or group dynamics at the facility. The team also examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. The team assesses the adequacy of staffing levels in that area during different shifts and assesses whether monitoring technology should be employed or augmented to supplement supervision by staff.

The team investigators examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.

The team assesses the adequacy of staffing levels in that area during different shifts. The team assesses, whether monitoring technology should be employed or augmented to supplement supervision by staff.

The above narrative is non-compliant with Standard provision 115.86(d), which mandates that the report of the Incident Review findings shall be submitted to the facility head and PREA Compliance Manager.

Agency to amend Policy 606.13 Incident Reviews to read:

The report shall be submitted to the Facility Commander or the authorized designee and the PREA Compliance Manager, in in order to comply with Standard provision115.86(d).

115.86(e): Policy 606.13 Incident Reviews mandates that the Facility Commander or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.86(d) and corrective action is required.

Corrective Action Recommended:

115.86(d): The above narrative is non-compliant with Standard provision 115.86(d), which mandates that the report of the Incident Review findings shall be submitted to the facility head and PREA Compliance Manager.

1. Agency to amend Policy 606.13 Incident Reviews to read:

The report shall be submitted to the Facility Commander or the authorized designee and the PREA Compliance Manager, in in order to comply with Standard provision115.86(d).

Corrective Action Completion Date: 12/17/24

	<p>115.86(d): 12/17/24 – Policy 606.13 Sexual abuse Incident Review Section (f) is amended to mandate:</p> <p>(f) “Prepare a written report of the team's findings, including but not limited to determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report shall be submitted to the Facility/ Watch Commander or authorized designee and the PREA Compliance Manager.”</p> <p>Amended narrative complies with Standard provision 115.86(d).</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.86(d) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.86.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.87(a): Policy 606.4 PREA mandates the PREA Coordinator to:</p> <p>(i) Establishing a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87; 34 USC § 30303; 15 CCR 1041).</p> <ol style="list-style-type: none"> 1. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. DOJ. 2. The data shall be aggregated at least annually. <p>115.87(b): Policy 606.4(l) PREA mandates that:</p> <p>PREA Coordinator shall establish a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87; 34 USC § 30303; 15 CCR 1041).</p> <ol style="list-style-type: none"> 1. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. DOJ. 2. The data shall be aggregated at least annually. <p>Agency has published PREA Annual Report annually since 2017 which includes</p>

	<p>accurate, aggregated, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office. 2023 Annual Report is provided from the Sheriff's website.</p> <p>115.87(c): Agency has published PREA Annual Report annually since 2017 which includes accurate, aggregated, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office. 2023 Annual Report is provided from the Sheriff's website.</p> <p>115.87(d): Policy 606.14 Data Reviews indicates that the Office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The review should include, as needed, data from incident-based documents, including reports, investigation files and sexual abuse incident reviews (28 CFR 115.87).</p> <p>115.87(e): N/A - Agency does not contract for the confinement of its inmates.</p> <p>115.87(f): N/A - Agency reports that the DOJ has not requested agency data.</p> <p><u>CONCLUSION:</u> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.87.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.88(a): Policy 606.14 Data Reviews mandates that the Office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The review should include, as needed, data from incident-based documents, including reports, investigation files and sexual abuse incident reviews (28 CFR 115.87). The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection and response policies, practices and training by:</p> <ul style="list-style-type: none"> a) Identifying problem areas (b) Identifying corrective actions taken. (c) Recommending corrective actions. (d) Comparing current annual data and corrective actions with those from prior years. (e) Assessing the office's progress in addressing sexual abuse. <p>The reports shall be approved by the PREA Coordinator and made readily available to the public through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).</p> <p>All aggregated sexual abuse data from Solano County Sheriff's Office Detention</p>

Facilities and private facilities with which it contracts shall be made readily available to the public at least annually through the office website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

Interview with the Agency Head or designee indicates that incident based sexual abuse data to assess and improve sexual abuse prevention, detection, and response policies, practices, and training identifies problems such as cameras, scheduling, staffing etc.

Interview with the PREA Coordinator indicates that agency review data collected, and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training. The agency insures data collected pursuant to the above standard is securely retained by utilizing the SharePoint Internet secure site. The agency takes corrective action on ongoing basis based on this data.

Interview with the PREA Compliance Manager indicates that Agency reviews, data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and a response, policies, and training. The facility and facility data plays a role in this review by assessing data problems, in particular areas taken into consideration, to conduct adjustment or repair compliant with PREA.

115.88(b): The 2023 Annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

115.88(c): Agency makes its annual report readily available to the public at least annually through its website and approved by the agency head.

Interview with the Agency Head or designee indicates that the Agency Head approves annual reports written pursuant to Standard 115.88. Annual Reports are uploaded to the Agency public website annually in order to make it readily available to the public.

115.88(d): When the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. Agency indicates the nature of the material redacted.

Interview with the PREA Coordinator indicates that types of material typically redacted from the annual report are any identified information of inmates or staff to include anything that causes safety and security issues. The Agency indicates the nature of the material redacted via short narrative in the report which indicates the nature of the redactions:

"All personal identifying information is redacted from the Annual Report as publication of this information would present a clear and specific threat to the safety and security of the facility."

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.88.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.89(a): Policy 606.15 Records mandates that all case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws. The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71). All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89). The agency ensures that incident-based and aggregate data are securely retained. Interview with the PREA Coordinator indicates that the agency reviews data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response, policies, and training. The agency insures that data collected pursued to the standard is securely retained through the SharePoint Internet secure site. The agency takes corrective action on an ongoing basis based on this data.</p> <p>AUDITOR TO DOCUMENT RECORD STORAGE OBSERVATION DURING SITE REVIEW RECORD STORAGE -:</p> <p>Interview with Internet Technology (IT) staff indicates that Intake, Classification, Investigative and Medical documentation are computerized documents:</p> <ul style="list-style-type: none"> - Determined safeguards regarding access and security of gathered information - County user has access credentials - Permission granted levels to access specific documents - Locked security permissions - Security permission level settings - Settings made by Business Units or IT, depending on level of access needed - Must have permission to access the system based upon specific details - Read only for Business Access - Electronic systems that require permissions: (ATIMS, RIMS & SHAREPOINT) <p>115.89(b): Policy 606.14 Data Reviews mandates that all aggregated incident based sexual abuse data from Solano County Sheriff's Office Detention Facilities shall be made readily available to the public at least annually through the office secure website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89). 2023 Annual Report aggregated data is available to the public through the agency website:</p> <p>https://www.solanocounty.com/depts/sheriff/prea.asp.</p> <p>115.89(c): Policy 606.14 Data Reviews mandates that all aggregated incident based</p>

sexual abuse data from Solano County Sheriff's Office Detention Facilities shall be made readily available to the public at least annually through the office secure website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

Policy 606.15 Records mandates that All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws.

The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).

115.89(d): Policy 606.15 Records mandates that All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws.

The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.89.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401(a): Solano County Sheriff's Office maintains three facilities, Justice Center Detention Facility, Stanton Correctional Facility and Claybank Detention Facility. Agency does not utilize or maintain any private organizations on behalf of the Agency. The Jail has successfully completed three previous PREA Audits, Claybank Facility in 2021, Justice Facility in 2022 and Stanton Facility in 2023. Solano County Jail is currently undergoing The Claybank Facility PREA Audit which began in 2024.

The Onsite Audit was conducted during the week of September 7, 2024.

115.401(b): Solano County Sheriff's Office maintains three facilities, Justice Center Detention Facility, Stanton Correctional Facility and Claybank Detention Facility. Agency does not utilize or maintain any private organizations on behalf of the Agency. The Jail has successfully completed three previous PREA Audits, Claybank Facility in 2021, Justice Facility in 2022 and Stanton Facility in 2023. Solano County Jail is currently undergoing The Claybank Facility PREA Audit which began in 2024. The Onsite Audit was conducted during the week of September 7, 2024.

401(h): During the current PREA Audit, the Agency allowed the auditor full access to all areas within the facility in order to observe the facility's operations. Auditor observed all areas of the Claybank Detention Facility during the Onsite Audit.

115.401(i): Agency has provided the auditor with any and all requested documentation and copies of any relevant electronically stored information.

115.401(m): Agency permitted the auditor to conduct private interviews with Incarcerated Persons (IPs), selected by auditor, housed in the Claybank Detention Facility.

115.401(n): PROCESSES FOR SENDING AND RECEIVING MAIL (MAIL DROP BOXES/ MAILROOM):
 Interview of staff responsible for inmate mail process indicates that inmates with no funding are provided a welfare pack once a week which contains pen, paper, 2 envelopes, bar of soap, toothbrush and toothpaste.
 REGULAR OUTGOING MAIL - The floor officer searches inmate mail envelopes in the inmate's presence, for contraband. Contraband is identified as anything that could hurt staff or inmates, escape information or information that could cause someone else harm. Envelope is then sealed, staff places their call-sign on the envelope along with a stamp and places in the Inmate Mail bag. Inmate Mail bag is brought to the visiting lobby to be picked up by official Postal Carrier. CONFIDENTIAL MAIL - Inmate shows open envelope to staff for review, then places the letter in the envelope and seals in presence of officer. The officer initials envelope and puts their call-sign on the letter. Officer brings letter to visiting lobby where it is stamped "Inmate Mail" and picked up by official Postal Carrier. INCOMING MAIL - Mail is opened and searched, scanned letter. Postage stamp is removed, then provided to the inmate.

CONCLUSION:
 Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.401.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>115.403(f): All previous Final PREA Audit Summary Final Reports have been published on the agency's website and made readily available to the public.</p> <p>https://www.solanocounty.com/depts/sheriff/custody_division/prea.asp</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.403(f).</p>
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Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	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)?	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?	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 two bullets immediately above?	no
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	no
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

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

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

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how 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
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

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

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

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

	present management or security problems?	
115.42 (d)	Use of screening information	
	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
115.42 (e)	Use of screening information	
	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
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	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.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	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?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	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
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	no
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	no
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	no
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	no
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

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

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

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	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.)	no
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

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