

PREA Facility Audit Report: Final

Name of Facility: Alexander Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 02/16/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Karen d. Murray	Date of Signature: 02/16/2022

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	01/24/2022
End Date of On-Site Audit:	01/25/2022

FACILITY INFORMATION	
Facility name:	Alexander Juvenile Detention Center
Facility physical address:	928 NC-16, Taylorsville, North Carolina - 28681
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Kimberly Cowart
Email Address:	kimberly.cowart@ncdps.gov
Telephone Number:	828-632-1141

Superintendent/Director/Administrator	
Name:	Kimberly Cowart
Email Address:	kimberly.cowart@ncdps.gov
Telephone Number:	828-632-1141

Facility PREA Compliance Manager	
Name:	Kimberly Cowart
Email Address:	kimberly.cowart@ncdps.gov
Telephone Number:	
Name:	Karen Millsaps
Email Address:	karen.millsaps@ncdps.gov
Telephone Number:	

Facility Health Service Administrator On-Site	
Name:	Jeff Paysour
Email Address:	jeff.paysour@ncdps.gov
Telephone Number:	828-632-1141

Facility Characteristics	
Designed facility capacity:	24
Current population of facility:	24
Average daily population for the past 12 months:	20
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	Both females and males
Age range of population:	11-18
Facility security levels/resident custody levels:	n/a
Number of staff currently employed at the facility who may have contact with residents:	31
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	5
Number of volunteers who have contact with residents, currently authorized to enter the facility:	30

AGENCY INFORMATION	
Name of agency:	North Carolina Department of Public Safety
Governing authority or parent agency (if applicable):	
Physical Address:	512 North Salisbury Street, Raleigh, North Carolina - 27604
Mailing Address:	
Telephone number:	9197332126

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Charlotte Jordan-Williams	Email Address:	charlotte.williams@ncdps.gov

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:	
3	<ul style="list-style-type: none"> • 115.311 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.331 - Employee training • 115.353 - Resident access to outside confidential support services and legal representation
Number of standards met:	
40	
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:	2022-01-24
2. End date of the onsite portion of the audit:	2022-01-25

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:	On 1.4.2022 at 5:36 pm, this Auditor contacted The Shelter Home of Caldwell County at 515 Scroggs St NW, Lenoir, NC 28645 at 828.758.0888 and introduced herself and the reason for the call. The operator, Wanda B. stated she would take the callers information and ask them to call back in 30 minutes. The operator stated she would then call her superior and figure out which advocate to assist the resident. Once the resident called back, she would give the advocate information to the caller and or get the residents call back information and have the advocate call the resident.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	24
15. Average daily population for the past 12 months:	20
16. Number of inmate/resident/detainee housing units:	2
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input 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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	22
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	22

38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	10
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	3
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	30
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	30
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	4

52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
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INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	4
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54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input 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
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55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.
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56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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a. Explain why it was not possible to conduct the minimum number of random inmate/resident/detainee interviews:	There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.
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57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
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Targeted Inmate/Resident/Detainee Interviews

58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	13
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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>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</p>	<p>16</p>
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>10</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.</p>

<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was only a total of 16 residents outside of quarantine status. Of those, only four were random and the balance were targeted. I interviewed each of the 16 residents.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. 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>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility does not have segregated housing.</p>
<p>70. 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 text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	

71. Enter the total number of RANDOM STAFF who were interviewed:	7
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input type="radio"/> Yes <input checked="" type="radio"/> No
a. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)	<input type="checkbox"/> Too many staff declined to participate in interviews. <input checked="" type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles). <input type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews. <input type="checkbox"/> Other
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	I interviewed all random staff available from all three shifts.
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.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	13
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. 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>
<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input checked="" type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input checked="" type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input type="checkbox"/> Administrative (human resources) staff</p> <p><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input type="checkbox"/> Other</p>

81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

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: discussions related to testing critical functions are expected to be included in the relevant Standard-specific overall determination narratives.

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

85. Reviewing/examining all areas of the facility in accordance with the site review component of the audit instrument?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Testing and/or observing all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., intake process, risk screening process, PREA education)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	All of these situations are thoroughly described in applicable standards in the report.

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	All file reviews are thoroughly described in applicable standards of the report.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

93. 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	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	This facility is quite small with an average length of stay of under 30 days. In addition, their attention to PREA being interweaved in every aspect of programming, the layout, all individual cells, furniture placement, excessive cameras and mirrors and staff interactive supervision creates an environment where it is next to impossible for PREA incidents to take place.
99. 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	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. 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)
102. 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	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. 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)
105. 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	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	This facility is quite small with an average length of stay of under 30 days. In addition, their attention to PREA being interweaved in every aspect of programming, the layout, all individual cells, furniture placement, excessive cameras and mirrors and staff interactive supervision creates an environment where it is next to impossible for PREA incidents to take place.
107. 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 type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)

Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	This facility is quite small with an average length of stay of under 30 days. In addition, their attention to PREA being interweaved in every aspect of programming, the layout, all individual cells, furniture placement, excessive cameras and mirrors and staff interactive supervision creates an environment where it is next to impossible for PREA incidents to take place.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
Non-certified Support Staff	

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>DX Consulting</p>
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Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p>Auditor Overall Determination: Exceeds Standard</p>
	<p>Auditor Discussion</p> <p>Standard 115.311: Zero tolerance of sexual abuse and sexual harassment</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. Department of Public Safety Organizational Chart, dated 12.6.2021 4. Alexander Juvenile Detention Center Organizational Chart, not dated 5. NCDPS Office Memorandum, subject: Prison Rape Eliminate Act (PREA) Standards in Juvenile Facilities (1.14 Discipline), dated 11.8.2021 6. Alexander PREA Contacts, not dated 7. NCDPS Designation of PREA Compliance Manager(s), dated 1.15.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Supervisor 5. PREA Compliance Manager <p>Through interviews with residents and staff and review of resident and staff files, it was evident that this facility interweaves requirements for this standard in their daily protocol. Both residents and staff could speak to the facility PREA practices and protocols being used as is described in the agency NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document. Residents interviewed spoke to the many reporting options available to them to include the 'black box' on the Wing for PREA and grievance complaints.</p> <p>Site Review Observation:</p> <p>During the tour of the facility, this Auditor noticed Zero Tolerance, Advocate and PREA Audit postings throughout the facility. Camera placement throughout the facility and recreation yard was such no blind spots were noted. The facility has two Wings where residents reside. Each Wing has an area with self-addressed envelopes to the Program Director, PREA Office, and the Alexander Department of Social Services. Phone numbers to all reporting entities was found taped to desks where phone calls by residents were made.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states the agency NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures Document mandates zero tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract. NCDPS Sexual Abuse and Harassment Policy and P&R document, page iii, section DJJ Sexual Abuse Elimination Policy states, "The North Carolina Department of Public Safety is committed to a standard of zero-tolerance of sexual abuse and sexual harassment of persons under its supervision. Therefore, it is the policy of Juvenile Justice to provide a safe, humane and appropriately secure environment, free from the threat of sexual abuse and sexual harassment of juveniles, by maintaining a program of prevention, detection, response, investigation, and tracking."</p>

The facility provided the Department of Public Safety Organizational Chart. The organizational chart demonstrating Charlotte Jordan-Williams is the agency PREA Director.

The facility provided a NCDPS Office Memorandum, subject: Prison Rape Eliminate Act (PREA) Standards in Juvenile Facilities (1.14 Discipline). This memo states, "The PREA Auditor requests an addition or clarifying language to existing policy for NC Juvenile Justice Facilities. As a result, please find the modifications below in relation to "Juvenile Justice Facilities Sexual Abuse and Harassment Policy: dated September 2013 (additional language underlined). This change will be incorporated into the aforementioned policy revision to be completed by the end of the year.

1.14 Discipline:

A. (Underlined language only) Staff who engage in sexual abuse shall immediately be prohibited from contact with residents and shall be reported to relevant licensing bodies or law enforcement agencies, unless the activity was clearly not criminal."

(b) The agency employs an upper-level, agency wide PREA Coordinator. The PREA Coordinator demonstrates she has sufficient time and authority to develop, implement and oversee agency efforts to comply with the PREA standards in all of its facilities. The PREA Coordinator is in the agency organization chart, who reports to the Professional Standards Policy and Planning Chief Deputy Secretary.

(c) The Alexander Juvenile Detention Center PAQ states the facility has a facility PREA Manager. This position is shown on the facility organization chart as the Detention Director. This position reports to the Western Regional Manager of Facility Operations.

The facility provided the Organizational Chart for Alexander Juvenile Detention Center, demonstrating the Detention Director is the designated PREA Compliance Manager.

The facility provided a NCDPS Designation of PREA Compliance Manager(s). This designation demonstrates a primary and alternate PREA Compliance Managers by the Office of PREA Administration.

The facility provided a PREA Contacts listing. This listing designates:

- one primary and three alternate/secondary PREA Compliance Managers;
- six PREA Support Persons (PSP);
- five PREA Investigators; and
- four PREA Trainers

Through such reviews, of the facilities three alternate/secondary PREA Compliance Managers, six PREA Support Persons, five Investigators and four PREA trainers for a facility with a bed capacity of 28 and the preaddressed envelopes available for resident reporting, the facility exceeds the standards requirements.

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>(a) The Alexander Juvenile Detention Center PAQ states the Alexander Juvenile Detention Center does not contract with private agencies for confinement services of their residents.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Detention Services Policy and Requirements and Procedures, Dated 7.2020
4. Staffing Plan PREA Review 2021, dated 10.26.2021
5. Staffing Plan PREA Review 2020, dated 8.6.2020
6. Staffing Plan PREA Review 2019, dated 5.14.2019
7. NCDPS 115.13 Staffing Analysis Alexander Juvenile Detention Center, dated 12.10.2021
8. NCDPS 115.13 Staffing Analysis Alexander Juvenile Detention Center, dated 2020
9. Department of Public Safety PREA Audit Report – Alexander Population Report, dated 12.8.2020 through 12.7.2021
10. Alexander Juvenile Detention Sample Schedule, dated 12.2021
11. Alexander Juvenile Detention Center Unannounced Site Visit, Logbook Documentation samples of ratios, dated 2020-2021

Interviews:

1. Random residents
2. Targeted residents
3. Random staff
4. Supervisors
5. PREA Compliance Manager

Staff and residents interviewed could attest to supervisory staff conducting unannounced rounds, each day. Staff interviewed stated when ratios were in danger of not being met, mandatory overtime was implemented and or supervisory staff contacted off shift staff to work. (Proper staff to resident ratios were witnessed throughout the on-site portion of the audit.)

During the interview with Shift Supervisor, he stated he gets very creative with unannounced rounds, due to the facility being so small and often times only three staff are on shift during the overnight hours, by coming in the building through doors other than the front door, coming in early when no one is expecting him or leaving the building and re-entering. The Supervisor stated rounds are logged in the Control room and the Program Directors office. The Supervisor stated he would document deviations or issues found during rounds on the Program Directors logbook in her office.

Site review observation:

During the tour and when waiting for interviews, this Auditor was able to witness the Supervisor in the hallways and Wings, several times throughout the day. Interviews were held on the 'back porch'; however, the room had large windows allowing the auditor to view the Control Room, Multipurpose room and the hallways throughout the day.

- (a) The Alexander Juvenile Detention Center PAQ states the agency requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse. The daily number of residents is 20.27 and the staffing plan

was predicated on 24 residents.

The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 11, section 1.12B Staffing, states “Juvenile Justice Central Office shall submit annual staffing plans to the PREA Office. The report must include staffing reports and any deviations from the required ratios. Additionally, the Central Office shall assess, determine, and document whether adjustments are needed to:

1. The staffing plan.
2. Prevailing staffing patterns.
3. The center’s deployment of video monitoring systems and other monitoring technologies; and
4. The resources the center has available to commit to ensure adherence to the staffing plan.

The facility provided completed Staffing Plans from 2019 - 2021, demonstrating an annual review was conducted. Each staffing plan includes the eleven components mandated by standard and facility policy. The facility lists each required component and any updates next to each component.

The facility provided Staffing Analysis for 2020 and 2021. Each analysis contains commentary on:

- General Facility Information
 - o Mission
 - o Juvenile Population and Special Vulnerabilities
 - o Facility Program and Services
 - o Current Staffing Levels
- PREA
 - o Prevalence of Substantiated and Unsubstantiated Incidents of Sexual Abuse and Harassment
 - o Previous Audit Findings
 - o Additional Information and/or Recommendations (nine recommendations for 2021)
- Conclusion

These documents are signed by the PREA Director.

(b) The Alexander Juvenile Detention Center PAQ states each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility did not have any deviations from the required ratios of their staffing plan.

(c) The Alexander Juvenile Detention Center PAQ states the facility is mandated by regulation to maintain 1:8 waking hour and 1:16 sleeping hour ratios. In the last 12 months the facility has not deviated from the staffing ratios during awake or sleeping hours.

The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 11, section 1.12A Staffing, states, “Each center director shall maintain staff ratios of a minimum of 1:8 during resident waking hours and 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances, which shall be fully documented. Only certified staff shall be included in these ratios.”

The facility provided a sample schedule demonstrating:

- Weekday shift 10:00 am – 10:00 pm have seven staff on shift (one staff working 8:00 am – 8:00 pm)

· Overnight shift of 10:00 pm to 10:00 am have three staff on shift

(d) The Alexander Juvenile Detention Center PAQ states the staffing plan is reviewed annually, in collaboration with the PREA Coordinator. Compliance is documented in policy as shown in provision (a) of this standard.

(e) The Alexander Juvenile Detention Center PAQ states unannounced rounds are conducted by intermediate or higher-level staff to identify and deter staff sexual abuse and sexual harassment.

The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 11-12, section 1.13E. Searches, states, "Center Directors or designated supervisors will conduct unadvertised rounds monthly during all shifts to identify and deter staff sexual abuse and sexual harassment. The Director/designee shall document unadvertised rounds in the logbook and in a separate file/document dedicated to recording (person conducting, time, relevant notes) unannounced rounds. Staff members are prohibited from alerting other staff members that these supervisory rounds are occurring unless such information is related to the legitimate operational functions of the center."

The facility provided 2021 Alexander unannounced site visit documentation from supervisors and logbook entries demonstrating supervisory staff appeared at the facility. Site sample visit documentation states, "On January 1, 2021, at 8:45 am – Conducted an unannounced walk-through of the facility. Staff was in the control room and the Shift Supervisor was running the watchman tours. The Shift Supervisor was walking through the facility making sure everything was clean and secure. Signed by the 3rd Shift Supervisor".

115.315	Limits to cross-gender viewing and searches
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 331 1469 618" style="list-style-type: none"> <li data-bbox="240 331 715 358">1. Alexander Juvenile Detention Center PAQ <li data-bbox="240 389 1469 416">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <li data-bbox="240 448 1437 506">3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013 <li data-bbox="240 537 815 564">4. Cross Gender Announcement Logbook entries 2021 <li data-bbox="240 595 1058 622">5. NCDPS Juvenile Justice Facility-Specific Orientation Checklist, dated 9.2021 <p data-bbox="240 707 352 734">Interviews:</p> <ol data-bbox="240 766 584 1133" style="list-style-type: none"> <li data-bbox="240 766 475 792">1. Random residents <li data-bbox="240 824 483 851">2. Targeted residents <li data-bbox="240 882 432 909">3. Random staff <li data-bbox="240 940 416 967">4. Supervisors <li data-bbox="240 999 584 1025">5. Human Services Coordinator <li data-bbox="240 1057 408 1084">6. Intake staff <li data-bbox="240 1115 576 1142">7. PREA Compliance Manager <p data-bbox="240 1169 1493 1491">This facility did not have any gay, bisexual or transgender residents at the time of the audit. When looking at data over the last 12 months with the PREA Compliance Manager and the Program Director, averages demonstrated only one gay resident had been in the program during the last year. All targeted residents at this program consisted of those who had reported abuse at intake and or who were cognitively disabled. All targeted and random residents, random and specialized staff, except one staff demonstrated cross gender searches had been trained at the facility; however, resident nor staff remembered an occasion where such searches had happened. Of the one staff who was unsure how transgender searches would be conducted, the Auditor challenged him to ask his supervisor what those protocols consisted of, to alleviate having to ask during a possible intake of a transgender. The Auditor did report 'a staff' was unsure of transgender search protocols and suggested the management team revisit search protocols of transgender residents with the staff. All residents reported their initial and any subsequent searches were respectfully conducted.</p> <p data-bbox="240 1581 499 1608">Site Review Observation:</p> <ol data-bbox="240 1639 416 1720" style="list-style-type: none"> <li data-bbox="240 1639 408 1666">1. Intake area <li data-bbox="240 1697 416 1724">2. Search area <p data-bbox="240 1814 1465 1939">During the tour of the facility the Auditor observed the Intake and search areas of the facility. Both areas were conducive to ensuring searches were conducted in a private secured area, outside of camera view. Training files revealed 100% of staff had been trained in cross gender strip searches. The Auditor was able to observe intakes during the audit. The intake included the following:</p> <ul data-bbox="240 1971 1465 2119" style="list-style-type: none"> <li data-bbox="240 1971 1150 1998">· PREA was explained to the intake who was experiencing her first time in incarceration <li data-bbox="240 2029 1465 2119">· Intake staff explained to the resident why we ask the questions regarding past abuse and identification. (This Auditor was able to spend time with the Intake staff (Supervisor) earlier in the day and provide feedback that some intakes are not transparent with their past or identification due to not knowing why such questions are asked by the facility.)

- Mental health log was completed – all intakes see mental health at this facility.
- Risk assessment was completed, including asking the intake if she preferred any particular pronouns.
- Continued to explain we ask these questions to ensure she was safe.
- Explained the strip search process
- Explained the entire PREA brochure, zero tolerance, who to report to, where to find reporting information and her right to be safe in the program.
- Explained grooming and what that meant
- Defined sexual harassment and sexual abuse
- Asked the intake if she was feeling comfortable with the conversation, thus far
- Explained the PREA Education Acknowledgment Form, the intake asked to read aloud to us, after acknowledging she understood and had no questions, the intake signed the form.

(a) Alexander Juvenile Detention Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their residents. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of residents.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013, page 11, section 1.13 A-B, states, "The center shall not conduct cross-gender strip searches except in emergency circumstances, where other remedies are not available, or when performed by medical practitioners. Emergency situations shall be thoroughly documented in the logbook and approved by the Center Director. The center shall not conduct cross-gender pat-down searches except in exigent circumstances. The center shall thoroughly document in the logbook all searches of juveniles and include the gender of the juvenile and staff member."

(b) Alexander Juvenile Detention Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches absent exigent circumstances. The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 11, section 1.13B. Searches, states, "The center shall not conduct cross-gender pat-down searches except in exigent circumstances. The center shall thoroughly document in the logbook all searches of juveniles and include the gender of the juvenile and staff member."

(c) Alexander Juvenile Detention Center PAQ states the facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified. Documentation of cross-gender searches will be recorded in the search logbook.

(d) Alexander Juvenile Detention Center PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 11, section 1.13B. Searches, states, "Staff shall ensure that residents 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 room checks."

The facility provided the DPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document including additional state policy regarding policies and procedures.

The facility provided Cross Gender Announcement Logbook entries. Logbook entries include statements, such as:

- 1.3.21: 7:15 am Breakfast. (C.G.A.) Cross Gender Announcement

- 2.8.21: 10:00 pm Count Boards reviewed and updated, watchman begin, Cross Gender Announcement made
- 3.13.20: 7:15 am Cross gender announcement made / breakfast/medication
- 4.12.21: 10:15 am, B showers start, Cross Gender Announcement
- 5.11.21: 6:20 am Cross gender announcement made

(e) The Alexander Juvenile Detention Center PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 12, section 1.13F. Searches states, "The center shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner."

(f) The Alexander Juvenile Detention Center PAQ states 100% of security staff receive training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner. "The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 12, section 1.13G. Searches, states, "The Department of Public Safety shall provide direct care staff with training in how to conduct cross-gender pat-down searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs."

The facility provided a NCDPS Juvenile Justice Facility-Specific Orientation Checklist. This Checklist demonstrates all newly hired staff are oriented to the individual facilities:

- Overview of the Juvenile Justice System & Juvenile Facilities
- Policy and Procedures Review
- Conduct Juvenile Roll Call Procedures
- Escorting Juveniles During Movement Inside and Outside Facility Procedures
- Search Procedures
- Assist and Visitation Procedures
- Facility Lockdown, Safety, and Disaster Drills
- Model of Care Curriculum
- Observation and Supervision of Juvenile Behavior Policies
- Observation and Documentation Procedures
- Admission and Orientation Procedures
- Record-Keeping and Documentation
- Detention Center Specific Documentation
- Facility Specific Documentation

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. Information for Person(s) with Direct and Indirect Contact Training Record, dated 1.1.2020 - 12.31.2021
4. PREA Refresher New Hire Training Records, dated 1.1.2021 - 12.31.2021
5. PREA Sexual Abuse and Sexual Harassment 101 Training Records, dated 1.1.2021 – 12.31.2021
6. PREA Sexual Abuse and Sexual Harassment (SAH) 101 (Online), dated 1.1.2021 – 12.31.2021
7. Statewide Term Contract – 961C – translation & Interpretation Services, effective dates 10.7.2019 – 6.30.2023
8. Department of Juvenile Justice Brochure, “Expect Respect” posters in English and Spanish, dated 12.2013
9. PREA Rape Elimination Act (PREA) Ways to Report poster in English and Spanish, not dated

Interviews:

1. Random residents
2. Targeted residents
3. Random staff
4. Shift Supervisor
5. PREA Compliance Manager

During interviews with targeted and random residents and Youth Counselor Technician and specialized staff, each stated residents were not used for translation services. Staff interviewed demonstrated each would contact a supervisory staff or contact the number posted for language services.

(a) The Alexander Juvenile Detention Center PAQ states the agency has established procedures to provide disabled residents equal opportunities to be provided with and learn about the agency’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. “The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 7, section 1.16C Resident Education, states, “Appropriate provisions shall be made as necessary for residents not fluent in English, persons with disabilities and those with low literacy levels.”

The facility provided training records, to include training for residents with Direct and Indirect Contact Training for persons with disabilities. The training records from the agency training database demonstrates 30 staff have completed training in the year 2021.

The facility provided a Statewide Term Contract for Translation and Interpretation Services. This contract’s effective dates are 10.7.2019 through 6.30.2023. The contract is intended for:

- Language translation
 - o Virtual
 - o Transcription
 - o Written

- Interpretation
 - o Over the phone
 - o Video Remote
 - o On-Site/In-Person
- American Sign Language (ASL)
- Computer Aided Real-time Translation (CART)
- Audio Video Localization
- Assessment, Testing and Training
- Consulting, Mentoring and Professional Development

(b) The Alexander Juvenile Detention Center PAQ states the agency has established procedures to provide residents with limited English equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Alexander Detention Center addresses compliance for this measure, in measure (a) of this provision.

The facility provided Department of Juvenile Justice Brochure, "Expect Respect" posters in English and Spanish. Posters speak to the following:

- NCDPS Zero Tolerance
- What are forms of Abuse and Neglect
 - o Physical Abuse
 - o Emotional Abuse
 - o Childhelp National Child Abuse Hotline 1.800.422.4453
- Reporting Abuse
 - o How Do I Report in the Community?
 - o How Do I Report in a Detention Center or Youth Development Center?
- Staying Safe
- Expect Respect
 - o You have the RIGHT to expect to be RESPECTED, kept SAFE, and for people to RESPOND if something does happen
 - o You should know
 - Sexual Abuse or Assault

The facility provided PREA Rape Elimination Act (PREA) Ways to Report posters in English and Spanish. Posters speak to the following:

- Policy of the North Carolina Department of Public Safety
- Employee Responsibilities
- Staff Reporting
- Residents Reporting
 - o To any departmental employee

- o Through Administrative remedy process (Grievance)
- o Writing a letter to the PREA Office-MSA 4201
- o Third Party to include family members, friends, outside organization
- o Local Rape Crisis Centers
- o Local Department of Social Services
 - Alexander County Dept. of Social Services, 604 7th St. SW, Taylorsville, NC 28681, 828.632.1080

§ Family and Friends Ways to Report

(c) The Alexander Juvenile Detention Center PAQ states the agency prohibits the use of resident interpreters. In the last 12 months the facility has had zero instances where residents were used for interpreters. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section 1.9 PREA Compliance Manager, states, "The Department will not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-responder duties, or the investigation of the resident's allegations."

115.317	Hiring and promotion decisions
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 432 300">Document Review:</p> <ol data-bbox="240 331 1469 1218" style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. Employment Background Applicant Statement Internal, not dated 4. Criminal Charges Report Procedures Employee Attestation, not dated 5. Employee Statement, PREA Notice and Information Collection for Current Employees, not dated 6. Employee Statement, PREA Hiring and Promotion Prohibitions, not dated 7. Administrative Memorandum: 10:2013, From: DPS HR Director, RE: PREA Hiring and Promotion Prohibitions 8. NC DPS Criminal History Check Form, dated 9.2013 9. DPS North Carolina Department of Public Safety Applicant Verification, dated 9.2013 10. Disqualifying Factors, Revised 5.24.2010 11. Form HR008, NC Department of Public Safety Professional Reference Check, dated 9.2013 12. NCDPS Applicant Verification form, dated 12.2020 13. NCDPS Professional Reference Check form, dated 12.2020 14. NCDPS Employment Statements form, dated 12.2020 15. Addendum to Administrative Memorandum 10-2013, RE: PREA Hiring and Promotion Prohibitions 16. 115.317 Hiring and Promotion 2021 Employee Records Spreadsheet, dated 1.1.2021 - 12.31.2021 <p data-bbox="240 1308 352 1335">Interviews:</p> <ol data-bbox="240 1366 584 1447" style="list-style-type: none"> 1. Human Services Coordinator 2. PREA Compliance Manager <p data-bbox="240 1478 1458 1603">Interviews with the PREA Compliance Manager and Human Services Coordinator demonstrated applicants determined to have been convicted of sexual abuse or sexual harassment charges were screened out during the application review process. Additionally, applicants who were terminated in past institutions for sexual abuse and or sexual harassment were not considered for employment or promotion.</p> <p data-bbox="240 1693 496 1720">Site Review Observation:</p> <p data-bbox="240 1751 1485 1877">Review of 12 staff personnel files and one volunteer file demonstrated 100% compliance with each area of the PREA Audit – Juvenile Facilities Documentation Review – Employee File/Records. Employees who had not answered Administrative Adjunction Checks and or had Institutional Reference checks were those staff who had been employed at the facility prior to PREA implementation.</p> <p data-bbox="240 1966 1477 2092">(a) The Alexander Juvenile Detention Center PAQ states the agency policy prohibits hiring or promoting anyone who may have contact with residents and prohibits enlisting the services of any contractor who may have contact with residents who has engaged in or been convicted in or administratively adjudicated in sexual activity described in paragraph (a)(2) of this standard.</p>

The facility provided an NCDPS Employee Statement, demonstrating applicants have affirmed they have not engaged in sexual harassment and sexual abuse, upon hire.

The facility provided an NCDPS Employee Statement, demonstrating staff have affirmed they have not engaged in sexual harassment and sexual abuse, upon promotion.

The facility provided NCDPS Applicant Verification where applicant affirm agreement with PREA hiring and Promotion Prohibitions in relation to 115.317.

The facility provided NCDPS Public Safety Professional Reference Check demonstrating institutional reference questions are asked for applicable applicants.

The facility provided a NCDPS Criminal History Record Check demonstrating the applicant has no convictions, traffic violations other than those that are considered minor.

The facility provided an administrative memorandum from the DPS Human Resource Director stating, "The Department of Public Safety must adhere to the United States Department of Justice Final Rule... on 115.17 Hiring and promotion decisions...."

The facility provided Form HR008, NC Department of Public Safety Professional Reference Check. This form demonstrates the agency is requesting reference information in regard to Standard 115.317

(b) The Alexander Juvenile Detention Center PAQ states agency policy requires the consideration of any incidents of sexual harassment when determining to hire and or promote anyone, or to enlist services of any contractor, who may have contact with residents.

The facility policy did not speak to institutional background reference checks; however, the facility provided an administrative memo, subject: PREA Hiring and Promotion Prohibitions, from the DPS Human Resource Director, clearly stating and directing all hiring and promotions to be in compliance with the provisions (b)(c)(d)(e)(f) and (g) of this standard, 115.317.

The facility provided an Addendum to Administrative Memorandum 10-2013, RE: PREA Hiring and Promotion Prohibitions. The memo states, "Pursuant to the memorandum dated August 30, 2013, this addendum serves to clarify directions for any and all employees (i.e., temporary, contractual, etc.) that are working in the NC Department of Public Safety without access to the Learning Management System." "To ensure compliance, current employees must be made aware of these hiring and promotion prohibitions and provide responses to three questions found on the Employee Statement form."

(c) The Alexander Juvenile Detention Center PAQ states Agency policy requires background checks are conducted with all new hires who have contact with residents, consults child abuse registries and makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months persons hired may have contact with resident who have had criminal background checks was seven.

The facility policy did not speak to institutional background reference checks; however, the facility provided an administrative memo, subject: PREA Hiring and Promotion Prohibitions, from the DPS Human Resource Director, clearly stating and directing all hiring and promotions to be in compliance with the provision of this standard, 115.317.

The facility provided Employees by Personnel Areas as of 08.2021 to demonstrate the number of persons hired in the past 12 months.

(d) The Alexander Juvenile Detention Center PAQ states the agency policy requires that a criminal background records check be completed, and applicable child abuse registries consulted before enlisting the services of any contractor who may have contact with residents. In the past 12 months there were zero contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents.

(e) The Alexander Juvenile Detention Center PAQ states the agency requires background checks to be completed every five years. Compliance of this standard is substantiated in provision (b) of this standard.

(f) Policy compliance of this standard is substantiated in provision (b) of this standard.

(g) Policy compliance of this standard is substantiated in provision (b) of this standard.

(h) Policy compliance of this standard is substantiated in provision (b) of this standard.

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <p>(a) The Alexander Juvenile Detention Center PAQ states the facility has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p> <p>(b) The Alexander Juvenile Detention Center PAQ states the facility has not installed electronic surveillance system since the last PREA audit.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Internal Investigation Facility PREA Investigator Guidelines, dated 4.2019
4. OPA-120 Incident Scene Tracking Log, dated 1.27.2010
5. NCDPS PREA Evidence and Prohibited Substance/Contraband Evidence Chain of Custody Form, not dated
6. NCDPS PREA Administration Memorandum RE: PREA Investigations and Compliance, dated 8.21.2021
7. NCDPS Know What to Do In Case of a Sexual Assault Brochure, dated 8.10.2018
8. Sexual Abuse Victim Support Memorandum of Agreement, dated 10.19.2021
9. Shelter Home of Caldwell County Flyer, not dated
10. Alexander PREA Contacts, not dated 3.28.2016
11. PREA Support Person Training Logs, dated
12. PREA Support Person Role and Responsibilities, not dated
13. PREA Support Person Training Curriculum, date 4.15.2013

Interviews:

1. Random residents
2. Targeted residents
3. Random staff
4. Supervisor
5. PREA Compliance Manager
6. Facility Investigators

Interviews with all residents and staff interviewed demonstrated all were clearly aware of reporting protocols for sexual harassment and abuse. Of those interviewed, each were comfortable reporting internally; however, each understood how to report to the state hotline, a trusted adult or legal representative. All but one staff interviewed clearly articulated first responder duties to include protecting, preserving and reporting. Of the one staff who could not articulate preservation of a resident's person the Auditor challenged her to revisit standard protocols. The Auditor did report to the Program Director that a staff was challenged to revisit preservation protocols and perhaps all staff could be reminded of these protocols. When staff and residents were asked where reporting protocol information was located, responses included on PREA postings in the Wings and hallways.

Site Review Observation:

There were no criminal investigations in the past 12 months. The facility had a multipurpose room where weekday education classed took place. In this room there were a multitude of sexual abuse awareness flyers available for residents.

- (a) The Alexander Juvenile Detention Center PAQ states the facility is responsible for conducting Administrative sexual abuse investigations. The agency/facility is not responsible for conducting criminal sexual abuse investigations (including

resident-on-resident sexual abuse or staff sexual misconduct). The Alexander County Sheriff's Department conducts all criminal investigations for the Alexander Juvenile Detention Center.

The facility provided NCDPS Internal Investigation Facility PREA Investigator Guidelines. These guidelines include instruction on Prior to Office of Sexual Investigation Assignments and instruction once an OSI Investigator is Assigned.

The facility provided an Incident Scene Tracking Log. This log is a record of:

§ All persons entering the incident scene

§ Facility Name/Number

§ Investigator Name

§ Scene Location

§ Individual Name/Title/Agency/Date/Time In/Time Out/Reason for Entering

The facility provided an Evidence Chain of Custody Form. This form documents:

§ PREA Evidence or Prohibited Substance/Contraband Description

§ Received from Name/Rank/Facility/Date and Time

§ Item Released by: To:

§ Reason

§ Date and Time

(b) The Alexander Juvenile Detention Center PAQ states the protocol is developmentally appropriate for youth. The protocol was adapted from the most recent edition of the DOJ's Office on Violence Against Women publication. The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 24, section 3.2.1, C. states, "The acute medical evaluations shall be in full compliance with standards established through the "National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." [U.S. Department of Justice; Office on Violence Against Women (September 2004)]. Per this standard, the alleged sexual abuse victim(s) shall be granted access to a Sexual Assault Nurse Examiner (SANE) at the designated acute medical evaluation center"

(c) The Alexander Juvenile Detention Center PAQ states the facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic examinations are offered at no cost to the victim. Where possible, all examinations are conducted by SAFE or SANE examiners. There have been zero medical exams, SAFE/SANE exams performed in the last 12 months. The NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 23, section 3.1.2, H.1., states, "An acute medical evaluation to be conducted at a designated medical center (The alleged victim shall be transported immediately to the designated medical center in order to assure physical health and well- being, and to optimize evidence collection)."

The facility provided a NCDPS PREA Administration Memorandum RE: PREA Investigations and Compliance. This memo is addressed to Local Law Enforcement Agencies and Sheriffs. The memorandum is from the Chief Deputy Secretary, Division of Adult Correction and Juvenile Justice. Page 1, section (c), states, "The agency shall offer all victims of sexual abuse access to forensic medical examinations whether on site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs." The Alexander Juvenile Detention Center uses the Baptist Hospital in Salem, North Carolina for SANE exams.

On February 2, 2022, at 8:47 am, this Auditor contacted the Atrium Health Wake Forest Baptist Hospital at 336.716.2011. Upon asking the Operator if the hospital provided SANE exams, this Auditor was transferred to the

Emergency Room. The Emergency Room attendant stated the Hospital has SANE nurses who are on call and would be contacted upon notification that a rape victim was in transport and or who had arrived at the hospital.

The facility provided a NCDPS Know What to Do In Case of a Sexual Assault Brochure. This brochure provides victims with the following information:

- What to do in case of rape
- Why is seeking medical care important
- Victims to be provided free forensic medical examinations
- Compensation paid through the rape victim assistance program
- How providers can assist
- No billing of the victim
- Additional victim notification requirements

(d) The Alexander Juvenile Detention Center PAQ states the facility attempts to make a victim advocate from a rape crisis center available to the victim, in person or by other means. All efforts are documented. If a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff or community member.

The facility provided an effective Memorandum of Agreement upon execution between the Alexander Juvenile Detention Center and Shelter Home of Caldwell County. The Shelter Home of Caldwell County agrees to provide victim support services related to sexual violence including hospital accompaniment for victim during the forensic medical examination process, in-hospital investigatory interview, referrals and follow-up crisis counseling via phone and/or mail.

On 1.4.2022 at 5:36 pm, this Auditor contacted The Shelter Home of Caldwell County at 515 Scroggs St NW, Lenoir, NC 28645 at 828.758.0888 and introduced herself and the reason for the call. The operator, Wanda B. stated she would take the callers information and ask them to call back in 30 minutes. The operator stated she would then call her superior and figure out which advocate to assist the resident. Once the resident called back, she would give the advocate information to the caller and or get the residents call back information and have the advocate call the resident.

The facility provided an Alexander PREA Contact Listing. This Listing is a list of staff who have received specialized training as a PREA Support Person. PREA Support Personnel are system-based advocates for facilities in the North Carolina Department of Public Service.

The facility provided a PREA Support Person Role and Responsibility Guideline. The Guideline Purpose states, "The purpose of this directive is to establish a standardized role of the PREA Support Person at each location and facility across the state for inmates, offenders and juveniles."

The facility provided a PREA Support Person Training Log and Curriculum. This training is an eight-hour course with a Lesson Objective: To provide the PREA Support Person with specialized training to prepare them to be a support person for inmate/juveniles who have experienced sexual abuse and harassment while incarcerated/under supervision."

(e) The Alexander Juvenile Detention Center PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

(f, h) The Alexander Juvenile Detention Center PAQ states the agency is responsible for administrative investigations and relies on another agency to conduct criminal investigations. The agency does request provision a-e of this standard are considered when conducting all investigations.

The facility provided a memorandum from a PREA Compliance Manager, stating, "Our department is responsible for conducting administrative investigations once Law Enforcement has completed criminal investigation. Therefore 115.321 (f)-1 is NA. During the pre-audit phase, the Auditor asked the PREA Compliance Manager if the PAQ should be corrected to state 'Yes'. The PREA Compliance Manager stated the PAQ should state 'Yes' therefore the facility does complete Administrative Investigations after all Criminal Investigations are completed.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
 3. NCDPS Prison Rape Elimination Act (PREA) Post Incident Review (PIR), dated 9.24.2019
 4. NCDPS Coordinated Response Overview, dated 2.6.2018
 5. Memo: PREA Investigations 2021
 6. <https://www.ncdps.gov/adult-corrections/prison-rape-elimination-act>
1. NCDPS Internal Investigation Case Assignment Form, dated 9.2019

Interviews:

2. Random residents
3. Targeted residents
4. Random staff
5. Supervisor
6. Investigator

Resident and staff interviews demonstrated each can report incidents of sexual abuse and sexual harassment through the grievance process, placing a note in the 'black box' on the Wing, reporting to staff or utilizing the hotline. Each stated being comfortable reporting incidents of sexual harassment and assault.

Site Review Observation:

Preaddressed envelopes to the Facility Director, Agency PREA Office, Alexander Department of Social Services were available on the Wing, toured. (Wing B was currently being used for quarantined youth and the Auditor did not enter the Wing.) The multipurpose room had several flyers with sexual abuse community services agencies in the local area.

(a) The Alexander Juvenile Detention Center PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had zero allegations of sexual abuse and sexual harassment that was received.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document page 9, section B.1, states, "The Alexander Juvenile Detention Center shall ensure that an administrative, Department of Inspections and Appeals (DIA) or criminal investigation is completed for all allegations of sexual abuse and sexual harassment as appropriate based on the particulars of the allegation."

The facility provided a NCDPS Coordinated Response Overview. The Overview is a detailed graph describing how each department staff is to respond to PREA allegations of sexual harassment and or sexual abuse.

The facility provided Form YD 002 Sexual Abuse Incident Response Checklist directing the 'Senior Person in Charge' on how to respond to the incident and make appropriate internal notifications.

The Facility Director provided the following memo to the PREA Auditor. "There have not been any PREA Investigations during 2021. The last PREA Investigation was 4.22.2016.

The facility provided a NCDPS Prison Rape Elimination Act (PREA) Post Incident Review (PIR) OPA 110 form. This form instructs the PREA Compliance Manager to document the following:

- Facility / Incident Date
- Investigation Completion Date / Finding
- Did the allegation require a policy or practice change?
- Was the incident motivated by race, gender, ethnicity, gang affiliation, actual status, perceived status or LGBTI?
- During the assessment of the area where the incident allegedly occurred, were there any physical barriers that may have enabled sexual abuse?
- Are staffing levels in that area adequate during different shifts?
- Based on assessment, should additional monitoring technology be deployed or augmented?
- Additional comments and/or corrective action taken.
- Sexual Abuse Review Team Members names, position or classification
- Person completing report
- Review and approval
- Final review and approval

(b) The Alexander Juvenile Detention Center PAQ states the agency has policy that requires allegations of sexual abuse or harassment to be referred for investigation to an agency with the legal authority to conduct criminal investigations when completing administrative investigations.

Agency policy NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures, pages 16-19, section 2.3 Response speaks to how the facility ensures how criminal and administrative investigations are complied with by internal and external investigators. However, page 16, section 2.3 A states, "Assignment of an Investigator: The Lead Investigator is responsible for assigning a trained PREA Investigator from another center when penetration is alleged. When the alleged act does not rise to the level of penetration or staff is not an alleged aggressor, the Lead Investigator may utilize internal, trained PREA Investigators." This policy procedure would not be consistent with criminal investigation directives within their agency policy and procedure.

During the pre-audit phase, the Auditor spoke with the PREA Analyst regarding the language in policy stating, "The Lead Investigator is responsible for assigning a trained PREA Investigator from another center when penetration is alleged." The Policy Analyst stated the language intent is for PREA Investigators to follow up with an Administrative Investigations where penetration exists.

The facility provided an Internal Investigation Case Assignment Form. This form documents the following:

- EMS/ERS Case Number
- CTS tracking number
- Date incident occurred
- Date incident reported to FACILITY/REGION/SECTION MANAGEMENT
- Date reported

- PERSON incident reported to
- Subject Employees name/Title/Work Location
- Region-Facility or Division/District or Section
- Incident location
- Other individuals involved
- Complainant's Name/Title/Work Location
- Reviewed by DPS EEO Office
- Subject Employee or Witnesses on LOA, FMLA, Workers' Comp, etc.?
- Co-Investigator or PREA Investigator Name
- Investigation Report Due Date

(c) <https://www.ncdps.gov/adult-corrections/prison-rape-elimination-act> demonstrates the agency web page for the agencies Prison Rape Elimination Act information and appropriate links for stakeholders to submit and or request information.

115.331	Employee training
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. Employee Statement PREA Hiring and Promotion Prohibitions, not dated 4. PREA OPA T10-Information for Persons with Direct or Indirect Contact, dated 1.1.2021 – 12.31.2021 5. PREA Refresher New Hire Training, dated 1.1.2021 – 12.31.2021 6. PREA Sexual Abuse and Sexual Harassment 101, dated 1.1.2021 – 12.31.2021 7. PREA Sexual Abuse and Sexual Harassment (SAH) 101 (Online)(In-Service), dated 1.1.2021 – 12.31.2021 8. Juvenile Justice Facilities Sexual Abuse and Sexual Harassment and Requirements, New Hire Training, dated 1.1.2021 – 12.31.2021 9. PREA – Understanding the LGBTI Offender Training, dated, 1.1.2021 – 12.31.2021 10. NCDPS Detention Centers Commitment to Quality of Care Statement, dated 11.2021 11. LMS (Learning Management System) Instructions for access to PREA Training, not dated 12. Daily Dozen Pamphlet, not dated 13. NCDPS Employee Brochure, not dated 14. Red Flags Poster, not dated 15. Sexual Abuse and Sexual Harassment Curriculum and Lesson Plan, dated 7.1.2018 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random staff 2. Target staff 3. PREA Compliance Manager 4. Program Director <p>Interviews with random and targeted staff demonstrated all were aware of and received initial and annual training through the agency LMS database. During the pre-audit phase, training records were uploaded to the Online Audit System and demonstrated 94% compliance. The one staff who had not completed training has been out on personal leave for the past few months.</p> <p>Site Observation:</p> <p>During review of staff training files, this Auditor noted 100% compliance for all 12 personnel files and one volunteer file reviewed.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states the agency trains all employees who may have contact with residents in all required provisions of this standard. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 6, section 1.4 A., states, "All employees shall receive initial instruction related to sexual abuse and harassment zero tolerance policy, the right for residents to be free from sexual abuse and harassment, the right for residents and staff to be free from retaliation for reporting sexual abuse and harassment, and how to avoid inappropriate</p>

relationships with residents. Training will also include dynamics and common reactions of resident sexual abuse and sexual harassment, effective and professional communication with residents including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents, and relevant laws regarding mandatory reporting and the age of consent.”

The facility provided Employee Statement PREA Hiring and Promotion Prohibitions. This statement is an understanding which states, “NCDPS may not hire or promote anyone who may have contact with inmates, residents or offenders under supervision who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.” The statement requires the applicant answer the following questions.

- “Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
- Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse?
- Have you been civilly or administratively adjudicated to have engaged in the activities described?”

The facility provided PREA OPA T10-Information for Persons with Direct or Indirect Contact. This document demonstrates 96.6% of staff completed this training as well as lists the names of each participant. The reason the facility does not have 100% of staff trained is due to one staff being on family leave.

The facility PREA Refresher New Hire Training. This document demonstrates 100% of staff completed this training as well as lists the names of each participant.

The facility provided PREA Sexual Abuse and Sexual Harassment 101. This document demonstrates 100% of staff completed this training as well as lists the names of each participant.

The facility provided PREA Sexual Abuse and Sexual Harassment (SAH) 101 (Online)(In-Service). This document demonstrates 100% of staff completed this training as well as lists the names of each participant.

The facility provided Juvenile Justice Facilities Sexual Abuse and Sexual Harassment and Requirements, New Hire Training. This document demonstrates 100% of staff completed this training as well as lists the names of each participant.

The facility provided PREA – Understanding the LGBTI Offender Training. This document demonstrates 96.2% of staff completed this training as well as lists the names of each participant.

The facility provided NCDPS Detention Centers Commitment to Quality of Care Statement. This is a statement to families regarding their hopeful involvement in the program and a contact number for the facility. In addition, this statement is a statement of the Juvenile Justice’s commitment of zero tolerance of all forms of abuse, neglect and assault whether it be physical, sexual or emotional.

The facility provided LMS (Learning Management System) Instructions for access to PREA Training. These instructions also demonstrate that staff must acknowledge, electronically, their understanding of the PREA training completed, online.

The facility provided Sexual Abuse and Sexual Harassment Curriculum and Lesson Plan. The training plan/curriculum includes the following topics,

- Identify PREA and the agency’s zero-tolerance policy of sexual abuse and sexual harassment for offenders/juveniles.
- Define sexual abuse and sexual harassment

- Define offenders/juveniles right to be free from sexual abuse and sexual harassment, and from retaliation for reporting.
- Define employee responsibilities when responding to sexual abuse and sexual harassment
- Define the unique attributes of working with females in confinement/under supervision.
- Define the unique attributes of working with males in confinement/under supervision.
- Define the vulnerabilities of persons in confinement/under supervision.
- Identify the dynamics of sexual abuse and sexual harassment in confinement/under supervision.
- Identify how to detect signs of threatened and actual sexual abuse in confinement/under supervision.
- Identify the common reactions to sexual abuse and sexual harassment.
- Identify methods of avoiding inappropriate relationships with offenders/juveniles.
- Identify techniques for communicating effectively and professionally with offenders/juveniles.

The facility provided the following pamphlets, flyers and brochures to further staff and resident awareness regarding appropriate boundaries: Daily Dozen Pamphlet, NCDPS Employee Brochure, and the Red Flags Poster.

(b) The Alexander Juvenile Detention Center PAQ states training is not tailored to the unique needs and attributes and gender of residents at the facility. During the pre-audit phase, the Auditor asked the PREA Compliance Manager if the PAQ should state 'Yes'. The PREA Compliance Manager affirmed the answer should be 'yes', verifying that the curriculum is tailored for the needs and attributes and gender of residents at the facility.

(c) The Alexander Juvenile Detention Center PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. Training is provided to all employees annually.

(d) The Alexander Juvenile Detention Center PAQ states the agency documents those employees who may have contact with residents, understand the training they have received through employee signature or electronic verification. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 6, section 1.4 F. states, "All training will be documented using the DPS Training Course Record (OSDT-1) and the PREA Acknowledgement Form (OPA-T10)."

Through such reviews, of the four different trainings completed each year in regard PREA related trainings the facility exceeds this standards requirement.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. Alexander Juvenile Detention Center Approved Volunteers Listing, dated 2021
4. Juvenile Justice Training Log Course Record, dated throughout 12.2021
5. Volunteer / Contractor PREA Training Acknowledgements, dated throughout 12.2021
6. NCDPS Specialized Medical and Mental Health PREA Training Acknowledgments, dated throughout 12.2021
7. NCDPS Volunteer and Contractor Pamphlet, not dated

Interviews:

1. Religious Volunteer

The religious volunteer was able to describe how to report suspicion or abuse regarding sexual harassment or sexual abuse. He explained he would report to supervisory staff on shift and would contact the Program Director, as well. The religious volunteer stated he has been trained and trains his volunteers as he oversees a prison ministry in the area.

(a) The Alexander Juvenile Detention Center PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and harassment prevention, detection, and response. nine contractors and volunteers, how have contact with residents, have completed the required training. The facility has 30 volunteers and five medical and mental health contractors.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 6, section 1.5 A 1-3. states,

1. Volunteers (with the exception of one-time volunteers), custodial agents, contractors and other persons providing services to residents shall receive the Sexual Abuse and Harassment 101 training and sign the PREA Acknowledgement Form (OPA-T10) as part of initial orientation.
2. One-time volunteers must review and sign the PREA Acknowledgement Form (OPA-T10) as part of their required overall training.
3. Sexual Abuse and Harassment 101 Training shall be offered by approved staff trainers certified as General Instructors unless an exception is given by the Section Chief.

The facility provided Alexander Juvenile Detention Center Approved Volunteers Listing. This listing demonstrates the facility has 30 Volunteers. The facility also attached the following:

- Volunteer contact names and contact numbers
- Weekly schedules, demonstrating days of the week each enters the facility
- The Volunteer brochure each volunteer acknowledged
- Training logs of individual trainings for each volunteer
- Signed PREA Acknowledgment Forms from each volunteer

The facility provided Juvenile Justice Training Log Course Records. These records demonstrate training logs for contracted Medical/Mental Health staff. In addition, the facility provided:

- Signed PREA Acknowledgement Forms
- Signed Medical and Mental Health Care PREA Training Acknowledgment Forms. Training curriculum included:
 - o How to detect and assess signs of sexual abuse and sexual harassment
 - o How to preserve physical evidence of sexual abuse
 - o How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment
 - o How to report allegations of suspicions of sexual abuse and sexual harassment
- The Volunteer brochure each contractor acknowledged

(b) The Alexander Juvenile Detention Center PAQ states all volunteers and contractors who have contact with residents have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 7, section 1.5 B. states, "CONTRACT PERSONS/AGENCIES (who have direct contact with residents): Contracts should include language that reflects commitment to a zero-tolerance of sexual abuse and sexual harassment, and the contract person's duty to report any allegations of resident sexual abuse or sexual harassment either by another resident or by staff. All contractor training shall be documented on the PREA Acknowledgement Form (OPA-T10). All contracts should reflect the contractor's obligation to adopt and comply with PREA Standards."

(c) The Alexander Juvenile Detention Center PAQ states the agency maintains documentation confirming that the volunteers and contractors understand the training they have received.

115.333	Resident education
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. Expect Respect Brochure, Spanish and English, dated 06.2013 4. Juvenile Justice Poster, Spanish and English, not dated 5. Admission Placement Screening/PREA Education, dated 12.21.2021 6. NCDPS Juvenile PREA Education Acknowledgement, not dated 7. NCDPS Training Course Record, Juvenile Rosters <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Human Services Coordinator 5. PREA Compliance Manager <p>Interviews with the 14 targeted and random residents, each reported their knowledge on PREA, reporting options to staff, the black boxes used for complaints, telling a friend, notifying a parent and the hotline numbers posted on Zero Tolerance Posters throughout the facility.</p> <p>Site Observation:</p> <p>14 resident files reviewed by utilizing the PREA Audit – Juvenile Facilities Documentation Review – Resident Files/Records template, demonstrated all had received PREA education on the day of intake and again within 10 days of intake; however, most received comprehensive training the day after intake.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states Residents receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. 282 residents admitted in the past 12 months were given information at intake. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 7, section 1.6 A-E. states,</p> <ol style="list-style-type: none"> A. All residents shall receive, during admission, information containing the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse and sexual harassment. B. All residents shall receive comprehensive age-appropriate education: (1) regarding their rights to be free from sexual abuse and sexual harassment, (2) their right to be free from retaliation for reporting such incidents, and (3) regarding response procedures for sexual abuse, sexual harassment, and retaliation incidents. Such education shall be completed within 10 days of admission. C. Appropriate provisions shall be made as necessary for residents not fluent in English, persons with disabilities and those with low literacy levels. D. All materials provided to residents on the subject of resident sexual abuse and sexual harassment, and any lesson plans

used during any presentations on this topic shall be approved by Department of Public Safety's PREA Office in consultation with the Manager of Clinical Programs.

E. Education for Residents shall be offered by staff members who have received training to deliver the PREA Resident Education course.

The facility provided a Juvenile Educator Manual, Facilitator Guide for Juvenile Training. The training manual introduction states, "PREA standards require that all residents (juveniles) receive education on PREA. Upon admission a juvenile is to receive information on the division's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicious of sexual abuse or harassment. PREA standards also require that within 10 days of admission, the division shall provide education to residents regarding their rights to be free from sexual abuse and sexual harassment and to free from retaliation for reporting such incidents, and regarding division policies and procedures for responding to such incidents." Although these manual states additional 10-day education will be provided, this facility provides training on day seven to juveniles in detention.

The facility provided Expect Respect Brochures in Spanish and English. These brochures speak to:

- Respecting self and others feeling
- Respecting self and other's boundaries
- Respecting self and others space
- Reporting abuse

The facility provided Department of Juvenile Justice Brochure, "Expect Respect" posters in English and Spanish. Posters speak to the following:

- NCDPS Zero Tolerance
- What are forms of Abuse and Neglect
 - o Physical Abuse
 - o Emotional Abuse
 - o Childhelp National Child Abuse Hotline 1.800.422.4453
- Reporting Abuse
 - o How Do I Report in the Community?
 - o How Do I Report in a Detention Center or Youth Development Center?
- Staying Safe
- Expect Respect
 - o You have the RIGHT to expect to be RESPECTED, kept SAFE, and for people to RESPOND if something does happen
 - o You should know

Sexual Abuse or Assault

The facility provided Admission Placement Screening/PREA Education. The 'Case Note' states, "Admission Placement Screening and PREA Education was completed during the intake process by Supervisor J.R. and reviewed by HSC T.D."

The facility provided NCDPS Juvenile PREA Education Acknowledgement samples. The Acknowledgment states, "NCDPS is committed to a standard of zero-tolerance of sexual abuse and harassment by staff, volunteers, contractors, or by the populations we serve. The Division of Juvenile Justice is equally committed to ensuring a safe and secure environment free from the threat of abuse for all youth in custody and/or under our supervision." The acknowledgment goes on to ensure the resident understands the information provided on the "Expect Respect: Your Safety in Juvenile Justice".

(b) The Alexander Juvenile Detention Center PAQ states within the past 12 months, 366 residents received age appropriate PREA education within 10 days of intake.

The facility provided NCDPS Training Course Record, Juvenile Rosters. Rosters are completed for each resident when the 10-day comprehensive training is completed. Comprehensive training consists of residents watching the Juvenile PREA Video.

(c) The Alexander Juvenile Detention Center PAQ states 100% residents were educated within 10 days of intake. Agency policy requires that residents who are transferred from one facility to another be educated regarding their rights. The facility states "when a juvenile is transferred from one facility to another, they are considered a new admission at the new facility."

(d) Policy compliance can be found in provision (a) of this standard.

(e) The Alexander Juvenile Detention Center PAQ states the facility maintains documentation of resident participation in PREA education sessions.

(f) The Alexander Juvenile Detention Center PAQ states the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Office of Staff Development and Training In-Service Training (SAH Investigator Lesson Plan), dated 1.31.2013
4. NCDPS Sexual Abuse and Harassment Investigations: Understanding Sexual Abuse Training, dated 1.1.2013
5. NCDPS PREA Investigators OSDT 001 Training Course Record, dated 7.17.2014
6. 2021 Alexander PREA Staff List, not dated

Interviews:

1. Facility Investigator
2. PREA Coordinator

Interviews with facility investigator, the PREA Coordinator and file review demonstrated that each investigator interviewed or reviewed had current investigator training. Each investigator interviewed clearly articulated their role in an investigation and process steps to be taken as is described in the facility coordinated response.

(a) The Alexander Juvenile Detention Center PAQ states the agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 16, section 2.3 B.1., Investigator Training, stating, "In addition to the general training provided to all employees, the Division shall ensure that, its investigators have received specialized PREA Sexual Abuse and Harassment Investigator training."

The facility provided NCDPS Office of Staff Development and Training In-Service Training (SAH Investigator Lesson Plan) with a lesson objective which states, "To provide Sexual Abuse (SA) Investigating Officers with the dynamics of sexual abuse, the skills to conduct a sexual abuse investigation and the abilities to professionally respond to sexual abuse and harassment allegations." Learner objectives include:

1. Identify the "Prison Rape Elimination Act (PREA) of 2003" and the National Standards
2. Identify North Carolina sexual offense statutes.
3. Identify Division Sexual Abuse and Harassment Policies.
4. Define Investigative Warnings.
5. Define Interviewing.
6. Identify the characteristics of a good interviewer.
7. Define the rules of successful Interviewing.
8. Define the Skill Learning Cycle.
9. Identify verbal behaviors of untruthfulness.
10. Identify the five basic types of lies.
11. Define a report and its purpose.
12. Identify responsibilities of the investigating officer in sexual abuse and harassment incidents.

13. Define Incident Scene and Evidence Processing.
14. Identify the role of the PREA Support Person.
15. Demonstrate how to conduct and document a proper investigation.
16. Demonstrate an understanding of preparing the investigating officer's comments.
17. Define Investigation timeframes.
18. Identify the role of Department employees in Criminal Prosecutions.
19. Identify the applicability of the North Carolina Division of Adult Correction (Prisons & Community Corrections) and Division of Juvenile Justice Policy and Procedures.

The facility provided NCDPS Sexual Abuse and Harassment Investigations: Understanding Sexual Abuse Training with a lesson objective which states, "To provide PREA (Sexual Abuse) Investigations with the dynamics of sexual abuse that will aid in conducting thorough investigations. Learner objectives include:

1. Define the importance of a specialized Sexual Abuse (PREA) Investigator.
2. Define a Victim-Centered Investigative Approach.
3. Define sexual abuse.
4. Define how trauma impacts survivors.
5. Identify how power and control are related to sexual abuse.
6. Identify common patterns of sexual abuse in confinement settings.
7. Define verbal and nonverbal communications with victims.

The facility provided PREA Investigators OSDT 001 Training Course Record from 7.17.2014 listing five investigators in total who completed the training course.

(c) The Alexander Juvenile Detention Center PAQ states the agency maintains documentation showing that investigators have completed the required training. The Alexander Juvenile Detention Center PAQ states the facility currently has four investigators currently employed who have completed specialized investigator training. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 16, section 2.3, B.2., states, "The Department shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations."

The facility provided a 2021 Alexander PREA Staff List stating five employees currently serving as PREA Investigators for the facility.

The facility provided PREA Investigator OSDT 001 Training Course Record demonstrating one of the four agency investigators completed investigator training. During the site review, the Facility Director was the one investigator interviewed, who had completed investigator training.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. OPA-T330.pdf, NCDPS Medical & Mental Health Care PREA Training Acknowledgment Form, not dated
4. NCDPS Training Course Record, dated throughout 12.2021
5. NCDPS Medical and Mental Health Care PREA Training Acknowledgment Forms, dated throughout 12.2021

Interviews:

1. Investigator
2. Program Director

During interviews the Investigator and the Program Director, each were able to demonstrate procedural steps to follow during a sexual abuse investigation. Each could articulate how they would ensure the resident understood the processes, how to notify the proper authorities, the SANE/SAFE hospital being used, and that each occurrence would be documented in an incident report in TROI, the agency database.

Site Observation:

Medical and mental health services are through contracted services in the community.

(a) The Alexander Juvenile Detention Center PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. 100% of Alexander Juvenile Detention Center medical and mental health staff who work at the facility have received training required by agency policy. All medical and mental health staff are contracted.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 7-8 section 1.7 A. 1-4, states, "All medical care providers who work regularly in centers will be trained on:

1. How to prevent, detect and assess signs of sexual abuse and sexual harassment.
2. How to preserve physical evidence of sexual abuse.
3. How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and
4. Reporting procedures for allegations or suspicions of sexual abuse and sexual harassment. Training will be documented on the PREA Medical/Mental Health Training Acknowledgement (OPA-T330)."

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 8, section B. 1-5, states, "All mental health care providers who work regularly in centers will be trained on:

1. How to detect and assess signs of sexual abuse and sexual harassment.
2. The short- and long-term consequences of sexual trauma on juveniles.
3. How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and
4. Reporting procedures for allegations or suspicions of sexual abuse and sexual harassment.

5. Training will be documented using the PREA Medical/Mental Health Training Acknowledgement (OPA-T330).

The facility provided OPA-T330 NCDPS Medical and Mental Health Care PREA Training Acknowledgment Form to document contracted staff have received PREA Training for Medical and Mental Health Care providers. Staff signatures acknowledge they have received and understood the information provided in the training.

(b) The Alexander Juvenile Detention Center PAQ states their medical staff do not conduct forensic medical exams.

(c) The Alexander Juvenile Detention Center PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 8, section C. states, "Medical/mental health providers will also attend Sexual Abuse and Harassment 101 training for employees.

115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.341: Screening for risk of victimization and abusiveness</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. YD 12 001 Admission and Placement Screening for DC's and YDC's, dated April 2019 4. Obtaining Information from Resident Training (Risk Screening Tool), dated 10.14.2021 5. Memo to all Mental Health Staff, dated 6.1.2012 6. Alexander Juvenile Detention Center Mental Health Internal Juvenile Admission List, not dated 7. Alexander Juvenile Detention Center One Year Juveniles, 2022, dated 1.25.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Intake staff 2. Supervisors <p>Interviews with intake and supervisory staff demonstrated that they complete a risk assessment with each resident within the first two hours of admission. Each stated that the resident risk level is communicated to facility staff through a color-coded system kept in the Control Room. Every intake at the Alexander Juvenile Facility is seen by Mental Health Services.</p> <p>Site Observation:</p> <p>During review of 14 resident files, this Auditor noted each resident had received screening on the day of admission. Average length of stay at this facility is 20 days, however, the facility did have two residents who have been in the program more than 12 months. Those two residents had not been reassessed at the time of the onsite phase of the audit. On 1.25.2022, both residents were reassessed, and the facility created a system to ensure residents with a length of stay of more than one year are reassessed before beginning their 13 months in the program.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states the facility has a policy that requires screening, upon admission or transfer, for risk of sexual abuse victimization or sexual abusiveness toward other residents. In the past 12 months 223, 100% of residents whose length of stay was longer than 72 hours, were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility.</p> <p>NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013, page 9, section 1.10 A, states, "All residents shall receive the PREA Admission and Placement Screening (Form YD 011) within 72 hours of arrival at the center and periodically (e.g., housing assignment change, change in vulnerability or aggression, etc.) throughout a resident's confinement. An objective screening tool will be used. This screening shall include a review of any history of sexual abuse- victimization or sexually predatory behavior, any gender non-conforming appearance, identification as LGBTI, current charges and offense history, age, level of emotional and cognitive development, physical size and stature, mental illness or disabilities, intellectual or developmental disabilities, physical disabilities, and the resident's own perception of vulnerability. Residents will also be offered a follow-up meeting with a licensed mental health clinician (LMHC) within 14 days of the admission screening."</p>

The facility provided the YD 12 001 Admission and Placement Screening for DCs and YDCs form. This admission form documents Juvenile Demographics, Risk of Victimization, collateral records review, staff observations of resident, intellectual or developmental disability, risk factors for victimization, propensity to Aggression which include standard provisions.

The facility provided a Memo to Mental Health from the Program Director, stating, "After discussing this with TDJ. They have agreed to ensure our new interim procedure is met. Prior to this notification, only those scoring on watch or alert LoC were seen by Mental Health. Effective Immediately, every juvenile admitted to the facility will be seen by mental health. This includes those scores on a regular level of care. As always, a juvenile will to continue to be seen if they request to do so."

(b) The Alexander Juvenile Detention Center PAQ states the facility conducts risk assessments by using an objective screening instrument. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013, page 10, section 1.10 B, states, "Any housing concerns noted by staff regarding a resident's history of sexual abuse-victimization or sexually predatory behavior shall be communicated to the resident's center management. Center management shall use information obtained to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse. Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only when alternative means of keeping resident's safe cannot be arranged. Any resident isolated for the purpose of sexual abuse prevention will receive daily visits from medical or mental health staff, have access to required educational programming, and have access to other programs to the extent possible."

(c) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013, page 10, section 1.10 C, states, "In deciding whether to assign a transgender or intersex resident to a center for male or female residents, and in making other housing and programming assignments, the division shall consider on a case-by-case basis whether a placement would ensure the residents health and safety, and whether the placement would present management or security problems. Transgender and intersex residents will be given the opportunity to shower separately from other residents. Housing and programming of these residents will be reassessed at least twice per year."

During the post audit phase of the audit, the facility provided an Alexander Juvenile Detention Center One Year Juveniles. This form was designed to keep track of and log reassessments to be completed for youth who are in the program longer than 12 months. The form contains the following information:

- Juvenile name
- Admit date
- Physical – date completed
- MAYSI – date completed
- Admin Place Screening – date completed

The completed form demonstrates both reassessments that were not done at periodically during the first year of being admitted, were completed on 1.25.2022.

115.342	Placement of residents
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 331 1469 528" style="list-style-type: none"> <li data-bbox="240 331 715 358">1. Alexander Juvenile Detention Center PAQ <li data-bbox="240 389 1469 416">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <li data-bbox="240 448 1150 474">3. YD 12 001 Admission and Placement Screening for DC's and YDC's, dated April 2019 <li data-bbox="240 506 647 533">4. 2021 Isolation statement, not dated <p data-bbox="240 618 352 645">Interviews:</p> <ol data-bbox="240 676 451 873" style="list-style-type: none"> <li data-bbox="240 676 427 703">1. Random staff <li data-bbox="240 734 451 761">2. Shift Supervisor <li data-bbox="240 792 411 819">3. Intake Staff <li data-bbox="240 851 379 878">4. Teacher <p data-bbox="240 909 1493 1034">Interviews with intake and facility staff demonstrated resident risk level is communicated to all departmental staff through the color-coded system, in the Control Room, which designates targeted residents for victimization and or aggression. Education, Medical and Wing staff stated they were made aware of risk levels of residents by checking notes in the TROI system, (agency database) or the color-coded system in the Control Room.</p> <p data-bbox="240 1120 419 1146">Site Observation:</p> <p data-bbox="240 1178 1485 1240">During review of 14 resident files, this Auditor noted each resident had received screening on the day of admission. Due to a short length of stay, residents do not have work assignments.</p> <p data-bbox="240 1326 1493 1688">(a) The Alexander Juvenile Detention Center PAQ states the facility uses information from the risk screening required by §115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013, page 10, section 1.10 B, states, "Any housing concerns noted by staff regarding a resident's history of sexual abuse-victimization or sexually predatory behavior shall be communicated to the resident's center management. Center management shall use information obtained to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse. Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only when alternative means of keeping resident's safe cannot be arranged. Any resident isolated for the purpose of sexual abuse prevention will receive daily visits from medical or mental health staff, have access to required educational programming, and have access to other programs to the extent possible."</p> <p data-bbox="240 1774 1485 1868">The facility provided the YD 12 001 Admission and Placement Screening for DCs and YDCs form. This admission form documents Juvenile Demographics, Risk of Victimization, collateral records review, staff observations of resident, intellectual or developmental disability, risk factors for victimization, propensity to Aggression which include standard provisions.</p> <p data-bbox="240 1953 1469 2119">(b) The Alexander Juvenile Detention Center PAQ states the residents may only be placed in isolation as a last resort to keep them safe from other residents, until other arrangements can be made. The facility requires residents in isolation continue to have access to the same programming offerings as all other residents outside of isolation. In the last 12 months there have zero residents placed in isolation at risk of sexual victimization or who were in need of protection from sexual victimization.</p>

(c) The Alexander Juvenile Detention Center PAQ states the facility prohibits placing and considering lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status.

(d) The Alexander Juvenile Detention Center PAQ states the facility makes housing and program assignments for transgender or intersex residents in a facility on a case-by case basis.

(e) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013, page 10, section 1.10 C, states, "In deciding whether to assign a transgender or intersex resident to a center for male or female residents, and in making other housing and programming assignments, the division shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems. Transgender and intersex residents will be given the opportunity to shower separately from other residents. Housing and programming of these residents will be reassessed at least twice per year."

(f) This provision is found compliant in provision (e) of this report.

(g) This provision is found compliant in provision (e) of this report.

(h) The Alexander Juvenile Detention Center PAQ states in the last 12 months, there were zero residents at risk of sexual victimization who were held in isolation.

(i) The Alexander Juvenile Detention Center PAQ states if residents were held in isolation, such resident would be afforded a review every 30 days to determine whether the continuation for separation was needed. This provision is found compliant in provision (e) of this report.

115.351	Resident reporting
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 331 1469 528" style="list-style-type: none"> <li data-bbox="240 331 715 358">1. Alexander Juvenile Detention Center PAQ <li data-bbox="240 389 1469 416">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <li data-bbox="240 448 1126 474">3. PREA Bulletin Board Document titled Prison Rape Elimination Act, dated 2.11.2014 <li data-bbox="240 506 956 533">4. Office of the Prison Rape Elimination Act Administration, not dated <p data-bbox="240 618 352 645">Interviews:</p> <ol data-bbox="240 676 480 819" style="list-style-type: none"> <li data-bbox="240 676 427 703">1. Random staff <li data-bbox="240 734 475 761">2. Random residents <li data-bbox="240 792 480 819">3. Targeted residents <p data-bbox="240 846 1469 1075">Residents interviewed were aware family members, friends or legal representatives could make third party reports if they were not comfortable reporting on their own. Each stated telephone procedures for legal and or PREA calls, which could be made in private, without monitoring or recording, as soon as staff can be available. Such phone calls were not noted to as have occurred. Residents interviewed spoke to the outside hotline advocate phone number being posted on the posters in the facility. Most residents interviewed was aware of her/his right to report anonymously. Of the random residents interviewed, each were able and willing to answer questions. The targeted residents interviewed, which had either reported abuse during intake or were cognitively disabled, stated their initial searches being respectful.</p> <p data-bbox="240 1160 427 1187">Site Observations:</p> <p data-bbox="240 1218 1414 1245">The 14 resident files reviewed demonstrated each had been educated on reporting requirements at the time of intake.</p> <p data-bbox="240 1330 1469 1429">(a) The Alexander Juvenile Detention Center PAQ states the agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about sexual harassment, abuse, retaliation and or any type of neglect.</p> <p data-bbox="240 1514 1493 1877">NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 13, section 1.15, states, "Retaliation against staff or residents alleging resident sexual abuse or sexual harassment is prohibited. Unless the allegation is determined to be unfounded, management is responsible for monitoring the conduct and treatment of residents and staff who reported the sexual abuse and the residents who were reported to have suffered sexual abuse for at least of 90 days following the report. The PREA Support Person is responsible for monitoring residents who report or have suffered sexual abuse. The PSP will document retaliation monitoring on the OPA-I24 (Offender/Juvenile Retaliation Report). The PREA Compliance Manager is responsible for monitoring staff who report sexual abuse incidents for indications and/or signs of retaliation (e.g., disciplinary actions, behavioral changes, etc.). Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The PCM will document staff retaliation monitoring on the OPA-I22 (Staff Retaliation Report). Any staff who have knowledge, suspicion, or information regarding retaliation against residents or staff who report sexual abuse or harassment must immediately report that knowledge, suspicion, or information to the PREA Office."</p> <p data-bbox="240 1962 1469 2092">(b) The Alexander Juvenile Detention Center PAQ states facility provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. The agency does not have a policy requiring residents 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.</p>

(c) The Alexander Juvenile Detention Center PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 14, section 2.1 B., states, " Staff Reporting: Any employee who receives an allegation or has knowledge of sexual abuse or possible sexual abuse or harassment and fails to report the allegation as provided in this policy or DJJDP 6, Reporting Abuse and/or Neglect, or fails to initiate a Sexual Abuse Incident Response Checklist, will be subject to disciplinary action up to and including dismissal. Staff has a duty to report any allegation that residents are having sexual relationships with other residents or with staff, as well as a duty to initiate the PREA Sexual Abuse Incident Response Checklist (Form YD 001). The senior person in charge has a duty to initiate the PREA Sexual Abuse Incident Response Checklist (Form YD 002). All reports of sexual abuse, sexual harassment, however made, are to be forwarded to the Center Director and the PREA Office immediately. Failure of staff to report alleged incidents of sexual abuse or sexual harassment will subject the non-reporting staff member to disciplinary action up to and including dismissal. Staff may use the DPS PREA public site to report allegations. NOTE: Sexual harassment is considered neglect and is reported to DSS and investigated by the Department of Public Safety."

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 14, section 2.1 C., states, " Third Party Reporting: All third-party reports of resident sexual abuse or harassment will be responded to and investigated. All parents/legal guardians are provided multiple methods to report. Additionally, there is a reporting link on the DPS public website.

(d) The Alexander Juvenile Detention Center PAQ states the facility provides residents with access to tools to make written reports of sexual abuse or sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

(e) The Alexander Juvenile Detention Center PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Staff have been informed of these procedures through initial and annual training as is described in provision 115.331(a) (1-11). NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document,

The facility provided an Office of the Prison Rape Elimination Act Administration document outlining the agency mission to promote the elimination of undue familiarity and sexual abuse amongst the offender population. The document also provides an email address PREA@ncdps.gov for third parties and staff to anonymously report undue familiarity or personal misconduct between employees and offenders. On 1.4.2022 at 9:39pm, this Auditor emailed PREA@ncdps.gov, explained the reason for the email. Immediately following the email, the Auditor received the following response.

"SVC_DPS.PREA SVC_DOC.PREA@ncdps.gov via nconnect.onmicrosoft.com
****AUTOMATED MAIL RESPONSE FROM PREA ADMINISTRATION****

Please keep this email for future references.

Your mail to PREA Administration has been received.

This is a receipt notification only. A personal response will be made by PREA Administration as soon as possible.

If your request is urgent, please call PREA Administration at 919-825-2757. Please leave a message on the voicemail if we are unavailable. Please do not call repeatedly over and over; if you leave a voicemail, we will return your call. Slowly say your name, staff id and phone number."

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013
4. DJJ Youth Development Policy and Requirements and Procedures (R&P) Document (Internal Grievance Process), not dated
5. NCDPS Letter to Juvenile Justice Staff, subject: PREA Refresher, dated 8.6.2015

Interviews:

1. Random residents
2. Targeted residents
3. PREA Coordinator

Residents interviewed were aware of the grievance procedures and understood a trusted adult could assist them, if needed. Residents interviewed had not filed a grievance form. Worthy of being noted, residents had not filed grievances in the last 12 months, and many reported they really liked the facility staff. Residents spoke highly of the Alexander Juvenile practices and although they didn't like the strip searches, they were conducted respectfully.

Site Observation:

Grievance / PREA boxes, third party postings and third-party reporting forms were available in highly trafficked areas by residents and visitors.

(a) The Alexander Juvenile Detention Center PAQ states the agency has an administrative procedure for dealing with resident grievances regarding sexual abuse. The DJJ Youth Development Policy and Requirements and Procedures (R&P) Document, page 1, section 6. Non-Disciplinary, Internal Grievance Process, states, "The North Carolina Division of Juvenile Justice supports a grievance system whereby juveniles residing in youth development centers and detention centers have the right to grieve living conditions, daily operations, staff conduct, safety and security mechanisms, or any service received (or failure to receive) while residing at the center. An effective grievance process also provides for a safe workplace and living space, where juveniles are allowed a healthy outlet for their concerns.

There are numerous mechanisms for conveying a concern. (1) The informal process includes complaining through in-person or telephone conversations, through the service planning process, or in written letters. (2) The formal grievance process is initiated when a person completes the DJJ Grievance form. These components contribute to an effective, responsive system within DJJ centers of addressing juvenile concerns.

The facility provided a NCDPS letter to Juvenile Justice Staff, written by the Deputy Commissioner, subject, Prison Rape Elimination Act (PREA) Refresher, which includes the following language, "If an allegation of sexual abuse or sexual harassment is received from a juvenile via a grievance, threat allegation will be responded to and investigated in accordance with protocols outline in the Sexual Abuse and Sexual Harassment policies."

(b) The Alexander Juvenile Detention Center PAQ states the agency has an administrative procedure for dealing with

resident grievances regarding sexual abuse. Agency policy and procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. Agency policy does not require a resident to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. Policy compliance can be found in provision (a) of this standard.

(c) The Alexander Juvenile Detention Center PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure require that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. The DJJ Youth Development Policy and Requirements and Procedures (R&P) Document, page 4, section 6.10. Grievance Process, B., states, "A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. Such grievance is not referred to a staff member who is the subject of the complaint."

(d) The Alexander Juvenile Detention Center PAQ states the agency's policy and procedures that require a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months:

- there have been zero grievances filed alleging sexual abuse;
- zeros grievance alleging sexual abuse that reached final decision within 90 days, after being filed;
- zero grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days, and;
- zero cases where the agency requested an extension of the 90-day period to respond to a grievance, and that had reached final decisions by the time of the PREA audit, some grievances took longer than a 70-day extension period to resolve.

The agency always notifies the resident in writing when the agency files for an extension, including notice of the date by which a decision will be made. The DJJ Youth Development Policy and Requirements and Procedures (R&P) Document, page 3-4, section 6.8. Non-Disciplinary, Internal Grievances to Center Director Concerning Sexual Abuse, A., states, "Any grievance that alleges sexual abuse by staff or juvenile shall be investigated with the final agency decision being communicated to the juvenile in writing within 90 days of the grievance. If the decision cannot be communicated to the juvenile in writing within the 90-day period, the PREA Support Person (PSP) shall notify the juvenile in writing that the determination is on-going, and that the final agency decision shall be communicated to the juvenile in writing within an additional 70 days. The juvenile shall be notified whether the grievance is founded and what the agency actions to address the grievance will be."

(e) The DJJ Youth Development Policy and Requirements and Procedures (R&P) Document, page 4, section 6.10. Grievance Process, C., states, "Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, and parents/legal guardians shall be permitted to file a grievance on behalf of or assist residents in filing grievances relating to allegations of sexual abuse." DJJ Youth Development Policy and Requirements and Procedures (R&P) Document (Internal Grievance Process), page 11, section 6.10 Grievance Process, A. – D., states:

- A. "There exists no time limit on grieving sexual abuse.
- B. A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. Such grievance is not referred to a staff member who is the subject of the complaint.
- C. Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, and parents/legal guardians shall be permitted to file a grievance on behalf of or assist residents in filing grievances relating to allegations of sexual abuse.
- D. The PREA Office offers a web link, address, and phone number for parents/legal guardians to use for complaints."

(f) The Alexander Juvenile Detention Center PAQ states the facility has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. The facilities policy

and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours. The facilities policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within 5 days. No grievances were received alleging substantial risk of imminent sexual abuse, that were filed in the past 12 months, reached final decisions within five days.

The DJJ Youth Development Policy and Requirements and Procedures (R&P) Document, page 2-3, section 6.5 Non-Disciplinary, Internal Grievances to Center Director, 1, states, "Review and sign each written grievance, and provide a response to the juvenile (when in our physical custody) within 48 hours of receipt; NOTE: For juveniles who have left the physical custody of DJJ, the Division will send the grievance response and an appeal form via certified mail to the juvenile."

The DJJ Youth Development Policy and Requirements and Procedures (R&P) Document, page 2-3, section 6.6 Non-Disciplinary, Internal Grievances to Center Director Concerning Sexual Abuse, states, "Emergency grievance: If a grievance alleges that a juvenile is at substantial risk of imminent sexual abuse, the director shall take immediate corrective action and provide an initial response to the juvenile within 48 hours of receiving the grievance. The Center Director/designee shall provide a final determination of whether the juvenile is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance within 5 calendar days."

(g) The Alexander Juvenile Detention Center PAQ states the facility has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, there have been zero grievances alleging sexual abuse to occasions where the agency demonstrated that the resident filed the grievance in bad faith. NCDPS Juvenile Justice Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 13, section D., states, "False Reporting: A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation."

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, dated September 2013
4. Memorandum RE: Juvenile Access to Outside Confidential Support Services, dated 1.10.2022
5. Shelter Home of Caldwell County documentation, to include
 - Rape & Sexual Assault Awareness Brochure, not dated
 - Get Help Flyer, not dated
 - Purple Card – Alexander Resources, not dated
 - Rape & Sexual Assault Awareness Brochure, not dated
6. NCDPS Expect Respect Brochure, dated 6.2013
7. PREA Bulletin Board Document, dated 2.11.2014
8. DJJDP Youth Development Policy and Requirements and Procedures: R&P/YD 4: Legal Representation, not dated

Interviews:

1. Random residents
2. Targeted residents

Residents interviewed demonstrated their reporting knowledge externally to include calling the hotline, or the advocate number posted or telling a trusted adult at the program or in the community. Each resident interviewed stated they felt safe in the program and comfortable reporting sexual harassment or abuse.

Site Observation:

Reporting numbers were taped to staff desks where juveniles made phone calls. During the pre-audit phase, the Auditor requested staff were made aware that hotline and advocate calls would be done without being monitored. A memo received by the Auditor, was also taped near the phone numbers, near the phone where residents made phone calls.

(a) The Alexander Juvenile Detention Center PAQ was blank. During the pre-audit phase, the Auditor asked the PREA Compliance Manager if the PAQ should state 'Yes'. The PREA Compliance Manger stated 'Yes' the facility provides residents with access to outside victim advocates for emotional support services related to sexual abuse by doing the following:

- Gives residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of local, State, or national victim advocacy or rape crisis organizations.
- Does not give immigrant residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of immigrant service agencies for persons detained solely for civil immigration purposes.
- Enables reasonable communication between residents and these organizations, in as confidential manner as possible.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, page 26, section 3.2.1 A., states, "The alleged victim shall be informed of the scope and limits of confidentiality, with particular regard to information obtained during the acute medical evaluation process"

On 1.4.2022 at 5:36 pm, this Auditor contacted The Shelter Home of Caldwell County at 515 Scroggs St NW, Lenoir, NC 28643 at 828.758.0888 and introduced herself and the reason for the call. The operator, Wanda B. stated she would take the callers information and ask them to call back in 30 minutes. The operator stated she would then call her superior and figure out which advocate to assist the resident. Once the resident called back, she would give the advocate information to the caller and or get the residents call back information and have the advocate call the resident.

The facility provided the Division of Juvenile Justice Resident brochures. The brochure includes a hotline number to Childhelp; however, contact information for the Shelter Home is provided.

The facility provided Shelter Home of Caldwell County documentation, to include

- Rape & Sexual Assault Awareness Brochure
- Get Help Flyer
- Purple Card – Alexander Resources
- Rape & Sexual Assault Awareness Brochure

In total, these documents provide access to the shelter, local crisis centers, local police, hotline numbers and access to third party reporting information, throughout the community.

The facility provides residents access to such services enabling reasonable communication between residents and advocates in as confidential a manner as possible through PREA education admission and 10-day training. In addition, Mental Health staff provide as private a location as possible for external phone calls to advocates and or hotline calls.

During the pre-audit phase, the facility provided a memo regarding juvenile access to outside confidential support services. The memo was written by the facility director and is addressed to all staff. The memo states, "Staff, please be advised and please let the juveniles know, when the juvenile is speaking with someone from the Shelter Home of Caldwell County and/or with the Department of Social Services their conversations are confidential. If they are speaking with them on the phone, staff can verify the individual calling, place the juvenile on the phone, and then you may observe the juvenile through the window of the door. Please keep eyes on the juvenile, always, but do not monitor their conversation. You may also provide supervision, for in person meetings with the Shelter Home of Caldwell County and/or with the Department of Social Services, in the same manner."

(b) The Alexander Juvenile Detention Center PAQ states the facility informs residents, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs residents, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

DJJDP Youth Development Policy and Requirements and Procedures, page 1, section 4 R&P/YD 4: Legal Representation, states, "All juveniles have the right to access the courts, to seek judicial relief without penalty or reprisal, and to have confidential contact by telephone, in writing, or in person with their legal representative."

During the in-take process, facility personnel review the facility rules, expectations, and procedures informing residents of their access to outside support services and to the extent to which such communications will be monitored.

(c) The Alexander Juvenile Detention Center PAQ states the facility maintains memoranda of understanding with community service providers that are able to provide residents with emotional support services related to sexual abuse.

The facility provided the Memorandum of Agreement. The Shelter Home of Caldwell County as is referenced in standard 115.323.

(d) The Alexander Juvenile Detention Center PAQ states the facility provides residents with reasonable and confidential access to their attorneys or other legal representation. The facility provides residents with reasonable access to parents or legal guardians.

Due to the overwhelming number of materials available to youth, throughout the facility and offerings provided, this facility exceeds these standard requirements.

115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, dated September 2013
4. Agency web address for Third Party Complaints: NC DPS: Prison Rape Elimination Act.

Interviews:

1. Random residents
2. Targeted residents
3. Random staff
4. Supervisory staff

Residents and staff interviewed demonstrated their reporting knowledge of third party reporting by telling a Court Counselor, a family member or calling the hotline.

(a) The Alexander Juvenile Detention Center PAQ states the facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 14, section C., states, "Third Party Reporting: All third-party reports of resident sexual abuse or harassment will be responded to and investigated. All parents/legal guardians are provided multiple methods to report. Additionally, there is a reporting link on the DPS public website."

The facility has multiple flyers posted throughout the facility and available information pamphlets and brochures for both residents and employees.

The Auditor accessed the agency website at NC DPS: Prison Rape Elimination Act. A link titled 'Submit a report of undue familiarity or sexual misconduct' allowed the Auditor to send an email to submit a report of undue familiarity or sexual misconduct.

On 1.4.2022 at 10:18 pm, this Auditor emailed PREA@ncdps.gov , explained the reason for the email. Immediately following the email, the Auditor received the following response.

"SVC_DPS.PREA SVC_DOC.PREA@ncdps.gov via nconnect.onmicrosoft.com
****AUTOMATED MAIL RESPONSE FROM PREA ADMINISTRATION****

Please keep this email for future references.

Your mail to PREA Administration has been received.

This is a receipt notification only. A personal response will be made by PREA Administration as soon as possible.

If your request is urgent, please call PREA Administration at 919-825-2757. Please leave a message on the voicemail if we are unavailable. Please do not call repeatedly over and over; if you leave a voicemail, we will return your call. Slowly say your name, staff id and phone number."

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2012
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, dated September 2013
4. NCDPS Abuse and Neglect Policy and Requirements and Procedures (R&P) Document, dated March 2010
5. Form YD 001 – Sexual Abuse Incident Response Checklist, dated June 2013
6. YD 002 Sexual Abuse Incident Response Checklist for Senior Person in Charge, dated August 2013
7. PREA Offender/Juvenile Retaliation Monitoring and Period Status Checks 01.05.2016

Interviews:

1. Random Residents
2. Targeted Residents
3. Random Staff
4. Supervisors
5. PREA Compliance Manager
6. Program Director/Facility Investigator

Interviews with staff and residents demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment. The PREA Coordinator, PREA Compliance Manager and Program Director explained all reports/allegations are documented in the agency database.

Site Observations:

This facility has never experienced a sexual harassment or sexual abuse allegation. After touring the facility, witnessing the many visual postings, addressed envelopes, talking with residents and staff and reviewing the impressive documentation uploaded during the pre-audit phase, the Auditor complements the facility for the obvious attention they hold in regard to PREA implementation and upholding standard requirements.

(a) The Alexander Juvenile Detention Center PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy any retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, page 15, section 2.2 D., states, "All allegations of sexual abuse shall be reported to the Center Director and the DPS PREA Office. REFERENCE: Sexual Abuse Incident Response Checklist (Form YD 002)."

NCDPS Abuse and Neglect Policy and Requirements and Procedures (R&P) Document, page 4, section 1.8 a-e, states, "What should a staff member do if he suspects, witnesses, or receives information involving possible abuse and/or neglect? The staff member who suspects, witnesses, or receives an allegation of abuse and/or neglect shall:

- a. Take immediate and appropriate action to safeguard the juvenile(s) involved;
- b. When the alleged abuse and/or neglect occurred in or on department- operated facility/grounds, immediately secure the scene;
- c. Immediately notify the on-site supervisor, or if not available, the next level supervisor in the chain of command, of the incident.
- d. Immediately notify DSS;
- i. Document the notification on Incident Report, including any information received from DSS;
- ii. Retain copies of all abuse and/or neglect documentation and evidence in a locked cabinet; and
- e. Complete the Incident Report.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, page 13, section 1.15, states, "Retaliation against staff or residents who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations is prohibited. Management is responsible for monitoring the conduct and treatment of residents and staff who reported the sexual abuse and the residents who were reported to have suffered sexual abuse for at least of 90 days following the report. If the allegation is determined to be unfounded, monitoring will no longer be required; documentation will be maintained by the PCM and a copy will be sent to the PREA Office. The PREA Support Person is responsible for monitoring residents who report or have suffered sexual abuse. The PSP will document retaliation monitoring on the OPA-I24 (Offender/Juvenile Retaliation Report). The PREA Compliance Manager is responsible for monitoring staff who report sexual abuse incidents for indications and/or signs of retaliation (e.g., disciplinary actions, behavioral changes, etc.). Monitoring shall begin immediately after the incident is reported and will continue beyond 90 days if the initial monitoring indicates a continuing need. The PCM will document staff retaliation monitoring on the OPA-I22 (Staff Retaliation Report). Any staff who have knowledge, suspicion, or information regarding retaliation against residents or staff who report sexual abuse or harassment must immediately report that knowledge, suspicion, or information to the PCM. Staff may also report suspected retaliation to the PREA Office by telephone or e-mail: PREA@ncdps.gov."

The facility provided Form YD 001 a detailed instruction First Responder Duties check list. YD 002 Sexual Abuse Incident Response Checklist for Senior Person in Charge detailing responsibilities for the senior person in charge.

The facility provided an Offender Juvenile Retaliation Monitoring and Period Status Checks form. This form states, "periodic status checks are required." "Note: It is recommended that periodic status checks be documented in this section at a minimum of every 30 days." The form provides an area to include the date, comments and PSP Initials, signs of retaliation, yes or no and any additional comments.

(b) The Alexander Juvenile Detention Center PAQ states the agency requires all staff to comply with any applicable mandatory child abuse reporting laws. Compliance can be found in provision (a) of this standard.

(c) Alexander Juvenile Detention Center PAQ states apart from reporting to the designated supervisors or officials and designated State or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

(d) Compliance can be found in provision (a) of this standard.

(e) NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, page 21, section 3.1, I., states, "Inform the alleged victim's parents and/or legal guardians of all concerns pertaining to possible sexual abuse, involving a resident(s) within a center, and the timing/location of all evaluation referrals."

Note: If the alleged victim is under the guardianship of the North Carolina child welfare system, the report shall be made to the alleged victim's caseworker instead of the parents and/or legal guardians.

Note: The senior person in charge and staff are prohibited from revealing any information regarding the alleged sexual abuse, of a resident of a center, unless expressly required to secure the immediate safety of a resident, and/or to meet mandated investigation, evaluation, intervention, and/or treatment requirements as established by State or local law or policy, or by DPS/JJ policy."

(f) NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedure (R&P) Document, dated September 2013, page 14, section 2.1 C., states, "Third Party Reporting: All third-party reports of resident sexual abuse or harassment will be responded to and investigated. All parents/legal guardians are provided multiple methods to report. Additionally, there is a reporting link on the DPS public website."

115.362	<p>Agency protection duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> Alexander Juvenile Detention Center PAQ NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <p>Interviews:</p> <ol style="list-style-type: none"> Program Director/Facility Investigator PREA Coordinator <p>Interviews with the Program Director/Facility Investigator and PREA Coordinator demonstrated the facility staff would act promptly and responds properly at the discovery of the incident.</p> <p>Site Observation:</p> <p>The facility did not have any investigations in the past 12 months.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the facility reports zero residents were subject to substantial risk of imminent sexual abuse. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 14-15, section 2.2 A., states, "The senior person-in-charge on campus shall ensure that the alleged victim and aggressor are physically separated, either through resident reassignment, staff reassignment, or some other effective means. Alleged victims shall only be reassigned as a last resort as to avoid any appearance to the resident that the reassignment is punitive/retaliatory."</p>
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115.363	Reporting to other confinement facilities
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 331 1469 506" style="list-style-type: none"> <li data-bbox="240 331 715 358">1. Alexander Juvenile Detention Center PAQ <li data-bbox="240 389 1469 416">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <li data-bbox="240 448 1437 506">3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013 <p data-bbox="240 595 352 622">Interviews:</p> <ol data-bbox="240 654 467 680" style="list-style-type: none"> <li data-bbox="240 654 467 680">1. Program Director <p data-bbox="240 712 1469 801">The interview with the Program Director demonstrated that she was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, she had the responsibility to notify the head of the facility where the allegation occurred. This instance had not occurred in the past 12 months.</p> <p data-bbox="240 891 1469 1048">(a) The Alexander Juvenile Detention Center PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency. In the past 12 months, the facility has received zero allegations that a resident was abused while in confinement at another facility.</p> <p data-bbox="240 1137 1469 1433">NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 11, section 1.11 A-B., state, "Upon receiving an allegation that a resident was sexually abused or harassed while confined at another center (to include agencies outside of DPS), the Center Director that received the allegation shall notify the Center Director or appropriate office where the alleged abuse occurred and shall also notify the appropriate investigative agency. Such notification shall be provided as soon as possible, but no later than 24 hours after receiving the allegation. The Center Director providing the notification shall document that the notification was made by sending an e-mail to PREA@ncdps.gov. The e-mail must contain: (Name of person making notification) contacted (Name of person notified) at (date time) regarding an allegation of sexual (abuse/harassment) that was reported to have allegedly occurred at (Facility) on (alleged date of abuse/harassment). This was also reported to: (DSS, Law Enforcement, PREA Office, etc.) on (date/time).</p> <p data-bbox="240 1523 1469 1612">(b) The Alexander Juvenile Detention Center PAQ states agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="240 1702 1469 1765">(c) The Alexander Juvenile Detention Center PAQ states the facility documents that it has provided such notification within 72 hours of receiving the allegation.</p> <p data-bbox="240 1854 1469 2112">(d) The Alexander Juvenile Detention Center PAQ states facility policy requires that allegations received from other agencies or facilities are investigated in accordance with the PREA standards. In the last 12 months, there have been zero allegations of sexual abuse the facility received from other facilities. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section 1.11 A., states, "Upon receiving an allegation that a resident was sexually abused or harassed while confined at another center (to include agencies outside of DPS), the Center Director that received the allegation shall notify the Center Director or appropriate office where the alleged abuse occurred and shall also notify the appropriate investigative agency. Such notification shall be provided as soon as possible, but no later than 24 hours after receiving the allegation."</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013
4. Form YD 001 (Sexual Abuse Incident Response Checklist), dated, June 2013
5. PREA Sexual Abuse Coordinated Response Plan Template and Instructions, not dated

Interviews:

1. Random staff
2. Supervisors
3. Investigator

Interviews with random and supervisory staff demonstrated each were aware of their first responder responsibilities.

Site Observation:

This facility has not had any reports of sexual harassment or sexual abuse, ever.

(a) The Alexander Juvenile Detention Center PAQ states the facility has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate, preserve, protect, collect physical evidence, 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, 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. In the past 12 months, one allegation occurred where a resident was sexually abused. During the one allegation, the security staff member immediately responded, separated and reported the alleged victim and abuser. In the past 12 months, there were zero allegations where staff were not notified within a time period that still allowed or the collection of evidence.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 20-21, section 3.1, 1.A-F, states, "Upon learning of a concern for sexual abuse, involving a resident(s) within a center, the first responding staff member shall be required immediately to:

- A. Alert local Emergency Medical Services (911) if the alleged victim(s) is exhibiting signs of obvious life-threatening injury and/or significantly altered mental state.
- B. Separate the alleged victim(s) and the alleged aggressors(s);
- C. Use the Sexual Abuse Incident Response Checklist to guide all subsequent actions; REFERENCE: Sexual Abuse Incident Response Checklist (Form YD 001 for first responders, and Form YD 002 for senior person in charge)
- D. Immediately inform the senior person in charge of all knowledge, suspicion, and/or information pertaining to:

1. Sexual abuse, involving a resident(s) within the center,
 2. Retaliation against resident(s) or staff who reported concerns of sexual abuse, sexual harassment, and/or voyeurism involving a resident(s) within the center, and/or
 3. Staff neglect/violation of responsibilities that may have contributed to an incident and/or retaliation; and
 4. Preserve and protect the potential crime scene(s) until the formal investigation is initiated.
- E. Request that the alleged victim (resident) avoid actions that could destroy (potential) physical evidence, including:
1. Washing (including hands and face),
 2. Bathing (including body and anogenital areas),
 3. Brushing teeth/flossing teeth/gargling,
 4. Changing/removing clothing,
 5. Urinating/defecating,
 6. Removing a tampon and/or sanitary pad,
 7. Cutting/trimming/cleaning fingernails,
 8. Smoking/chewing tobacco, and
 9. Drinking/eating/chewing gum.
- F. Request that the alleged aggressor avoid actions that could destroy (potential) physical evidence, including:
1. Washing (including hands and face),
 2. Bathing (Including body and anogenital areas),
 3. Brushing teeth/flossing teeth/gargling,
 4. Changing/removing clothing,
 5. Urinating/defecating,
 6. Removing a tampon and/or sanitary pad,
 7. Cutting/trimming/cleaning fingernails,
 8. Smoking/chewing tobacco, and
 9. Drinking/eating/chewing gum.

The facility provided Form YD001, Sexual Abuse Incident Response Checklist demonstrating first responders have a detailed outline for reporting incidents firsthand.

The facility provided the PREA Sexual Abuse Coordinated Response Plan Template and Instructions. Page 1, first paragraph states, "PREA Standards 115.65, 115.265 and 115.365 mandates that all facilities shall develop a written institutional plan to coordinate actions taken in response to an allegation of sexual abuse. The following PREA sexual abuse coordinated response plan template will be utilized by all DACJJ facilities when developing aforementioned plan.

(b) The Alexander Juvenile Detention Center PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. There have been zero allegations that a resident was sexually abused in the past 12 months where a non-security staff was the first responder. Procedures (R&P) Document, page 9, section B. states, "The PCM will ensure the center has a written, institutional plan (this policy, medical protocol, and Forms YD 001 and 002) for a coordinated response (first responders, medical, mental health, investigators, senior leadership) to resident sexual abuse and harassment issues."

115.365	Coordinated response
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 435 300">Document Review:</p> <ol data-bbox="242 329 1469 472" style="list-style-type: none"> <li data-bbox="242 329 715 358">1. Alexander Juvenile Detention Center PAQ <li data-bbox="242 387 1469 416">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <li data-bbox="242 445 935 474">3. Sexual Abuse Institution Response Plan, dated September 2021 <p data-bbox="242 557 352 586">Interviews:</p> <ol data-bbox="242 616 576 815" style="list-style-type: none"> <li data-bbox="242 616 432 645">1. Random Staff <li data-bbox="242 674 400 703">2. Supervisor <li data-bbox="242 732 576 761">3. PREA Compliance Manager <li data-bbox="242 790 464 819">4. Program Director <p data-bbox="242 846 1425 938">Interviews with the Program Director, PREA Coordinator, Supervisor and random staff demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to sexual abuse and sexual harassment incidents.</p> <p data-bbox="242 1028 416 1057">Site Observation:</p> <p data-bbox="242 1084 1350 1113">Review of the institutional plan demonstrates clear direction to staff to ensure first responder duties are fulfilled.</p> <p data-bbox="242 1200 1437 1292">(a) The Alexander Juvenile Detention Center PAQ states the facility developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="242 1379 1490 1509">The facility provided an Alexander Juvenile Detention Center Sexual Abuse Institution Response Plan detailing First Responder Duties, Victim Safety, Evidence Preservation, Alleged Abuser, Notifications, Medical Care and Notification Requirements, Investigations and actual names and duties of investigators, actual name and duties of the PREA Compliance Manager and PREA Support Person actual names and responsibilities.</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ <p>Interviews:</p> <ol style="list-style-type: none"> 1. Program Director 2. PREA Coordinator <p>Interviews with the Program Director and the PREA Coordinator determined the facility has not entered into collective bargaining agreements.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states the agency has not entered into or renewed any collective bargaining agreements since the last PREA audit.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013
4. NCDPS PREA Offender/Juvenile Retaliation Monitoring and Period Status Checks, dated 01.05.2016

Interviews:

1. PREA Support Person
2. Human Services Coordinator
3. PREA Compliance Manager

Interviews with PREA Support Persons and Compliance Managers demonstrated they would complete all retaliation monitoring and documentation in TROI, the agency database. The Human Services Coordinator stated retaliation notes would be kept in resident mental health case notes.

Site Observation:

A need for retaliation monitoring had not presented a need in the past 12 months.

(a) The Alexander Juvenile Detention Center PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The facility designates counselors, direct care staff or a designated supervisor as retaliation monitors.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 19, section 2.5, states, "The PREA Investigator and all others involved in the PREA process will strive to protect residents who make complaints of sexual abuse from retaliation, and assure the impartial resolution of PREA complaints in accordance with the Prison Rape Elimination Act of 2003, 42 U.S.C. § 15601, et seq. The PREA Investigator and all others involved in the PREA process, to the extent possible, will ensure the confidentiality of PREA complaints as well as all data collected through the investigation of those complaints except as required in the following circumstancesL1) to cooperate with law enforcement in any investigation and prosecution of the incidents alleged in such complaints; (2) to take and enforce disciplinary action against any staff member as a result of the incidents alleged in the complaints; (3) to defend against claims brought by the resident for violation of the resident's rights for having been subjected to sexual abuse; and (4) to otherwise comply with the law."

The facility provided an Offender Juvenile Retaliation Monitoring and Period Status Checks form. This form states, "periodic status checks are required." "Note: It is recommended that periodic status checks be documented in this section at a minimum of every 30 days." The form provides an area to include the date, comments and PSP Initials, signs of retaliation, yes or no and any additional comments indicate same names as those designated on the Office of PREA Administration MOU.

(b) Compliance can be found in provision (a) of this standard.

(c-e) The Alexander Juvenile Detention Center PAQ states the facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by residents or staff. The facility will monitor conduct or treatment until the resident is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had zero incidents of retaliation.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 13, section 1.15, states, "Retaliation against staff or residents who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations is prohibited. Management is responsible for monitoring the conduct and treatment of residents and staff who reported the sexual abuse and the residents who were reported to have suffered sexual abuse for at least of 90 days following the report. If the allegation is determined to be unfounded, monitoring will no longer be required; documentation will be maintained by the PCM and a copy will be sent to the PREA Office. The PREA Support Person is responsible for monitoring residents who report or have suffered sexual abuse. The PSP will document retaliation monitoring on the OPA-I24 (Offender/Juvenile Retaliation Report). The PREA Compliance Manager is responsible for monitoring staff who report sexual abuse incidents for indications and/or signs of retaliation (e.g., disciplinary actions, behavioral changes, etc.). Monitoring shall begin immediately after the incident is reported and will continue beyond 90 days if the initial monitoring indicates a continuing need. The PCM will document staff retaliation monitoring on the OPA-I22 (Staff Retaliation Report). Any staff who have knowledge, suspicion, or information regarding retaliation against residents or staff who report sexual abuse or harassment must immediately report that knowledge, suspicion, or information to the PCM. Staff may also report suspected retaliation to the PREA Office by telephone or e-mail: PREA@ncdps.gov."

115.368	Post-allegation protective custody
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 329 435 356">Document Review:</p> <ol data-bbox="242 385 1469 470" style="list-style-type: none"> <li data-bbox="242 385 715 412">1. Alexander Juvenile Detention Center PAQ <li data-bbox="242 441 1469 470">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <p data-bbox="242 557 352 584">Interviews:</p> <ol data-bbox="242 613 576 757" style="list-style-type: none"> <li data-bbox="242 613 453 640">1. Shift Supervisor <li data-bbox="242 672 576 698">2. PREA Compliance Manager <li data-bbox="242 728 464 757">3. Program Director <p data-bbox="242 786 1433 846">Interviews with program management staff demonstrated because each cell is a single use cell, cells are not utilized for protective custody.</p> <p data-bbox="242 934 416 960">Site Observation:</p> <p data-bbox="242 990 751 1016">All cells are single cells, each with a toilet and sink.</p> <p data-bbox="242 1106 1481 1301">(a) The Alexander Juvenile Detention Center PAQ states the facility has a policy that residents who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all resident's safe can be arranged. The facility policy requires that residents who are placed in isolation because they allege to have suffered sexual abuse have access to legally required educational programming, special education services, and daily large-muscle exercise." In the last 12 months there have been zero residents who allege to have suffered sexual abuse, who were placed in isolation.</p> <p data-bbox="242 1388 1490 1682">NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 9, section 1.10 B., states, "Any housing concerns noted by staff regarding a resident's history of sexual abuse-victimization or sexually predatory behavior shall be communicated to the resident's center management. Center management shall use information obtained to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse. Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only when alternative means of keeping resident's safe cannot be arranged. Any resident isolated for the purpose of sexual abuse prevention will receive daily visits from medical or mental health staff, have access to required educational programming, and have access to other programs to the extent possible."</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013

Interviews:

1. Facility Investigator/Program Director

Interviews with the Facility Investigator/Program Director demonstrated she had completed initial and annual specialized investigator training. The Facility Investigator/Program Director clearly articulated processes required during an investigation.

Site Observation:

The facility did not have any investigations in the past 12 months.

(a) The Alexander Juvenile Detention Center PAQ states the agency/facility has a policy related to criminal and administrative agency investigations. The agency and facility have policies NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, and NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, which both speak to Investigation processes, in depth.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 16, section 2.3 B.1., Investigator Training, stating, "In addition to the general training provided to all employees, the Division shall ensure that, its investigators have received specialized PREA Sexual Abuse and Harassment Investigator training."

The facility provided NCDPS Office of Staff Development and Training In-Service Training (SAH Investigator Lesson Plan) with a lesson objective which states, "To provide Sexual Abuse (SA) Investigating Officers with the dynamics of sexual abuse, the skills to conduct a sexual abuse investigation and the abilities to professionally respond to sexual abuse and harassment allegations." Learner objectives include:

1. Identify the "Prison Rape Elimination Act (PREA) of 2003" and the National Standards
2. Identify North Carolina sexual offense statutes.
3. Identify Division Sexual Abuse and Harassment Policies.
4. Define Investigative Warnings.
5. Define Interviewing.
6. Identify the characteristics of a good interviewer.
7. Define the rules of successful Interviewing.
8. Define the Skill Learning Cycle.
9. Identify verbal behaviors of untruthfulness.
10. Identify the five basic types of lies.

11. Define a report and its purpose.
12. Identify responsibilities of the investigating officer in sexual abuse and harassment incidents.
13. Define Incident Scene and Evidence Processing.
14. Identify the role of the PREA Support Person.
15. Demonstrate how to conduct and document a proper investigation.
16. Demonstrate an understanding of preparing the investigating officer's comments.
17. Define Investigation timeframes.
18. Identify the role of Department employees in Criminal Prosecutions.
19. Identify the applicability of the North Carolina Division of Adult Correction (Prisons & Community Corrections) and Division of Juvenile Justice Policy and Procedures.

The facility provided NCDPS Sexual Abuse and Harassment Investigations: Understanding Sexual Abuse Training with a lesson objective which states, "To provide PREA (Sexual Abuse) Investigations with the dynamics of sexual abuse that will aid in conducting thorough investigations. Learner objectives include:

1. Define the importance of a specialized Sexual Abuse (PREA) Investigator.
2. Define a Victim-Centered Investigative Approach.
3. Define sexual abuse.
4. Define how trauma impacts survivors.
5. Identify how power and control are related to sexual abuse.
6. Identify common patterns of sexual abuse in confinement settings.
7. Define verbal and nonverbal communications with victims.

(b) The facility investigators have completed PREA Support Person specialized training, which includes specialized investigator training.

(c) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 4D-01, Sexual Assault/Abuse/Harassment, page 21, section A. 2., states, "The appropriate individuals shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview resident victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator."

(d) The Alexander Juvenile Detention Center PAQ states the agency does not terminate an investigation solely because the source of the allegation recants the allegation. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 18, section M. 1., states, "The Department of Public Safety shall not terminate an investigation solely because the source of the allegation recants the allegation."

(e) NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 18-19, section M. 2, states, "When the quality of evidence appears to support criminal prosecution, the Department of Public Safety shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution, while maintaining resident rights. Substantiated allegations of sexual abuse that appears to be criminal/delinquent shall be referred to the District Attorney. The departure of the alleged aggressor or victim from the employment or control of the Department of Public Safety shall not provide a basis for terminating an investigation. REFERENCE: Law Enforcement Interviews of Juveniles policy for parental notification and juvenile rights information."

(f) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 17, section 2.3 G., states, "A resident that alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

(g) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 17, section 2.3 G., states, "A resident that alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. During the pre-audit phase, the Auditor asked the PREA Compliance Manager where investigations were documented. The PREA Compliance Manager explained that all resident demographic information, including investigations are documented in the State TROI/OSI database.

(h) The facility does not conduct criminal investigations.

(i) The Alexander Juvenile Detention Center PAQ states there has been zero sustained allegation of conduct that appears to be criminal that was referred for prosecution, since the last audit date. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 18, section M. 2., states, "When the quality of evidence appears to support criminal prosecution, the Department of Public Safety shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution, while maintaining resident rights. Substantiated allegations of sexual abuse that appears to be criminal/delinquent shall be referred to the District Attorney. The departure of the alleged aggressor or victim from the employment or control of the Department of Public Safety shall not provide a basis for terminating an investigation. REFERENCE: Law Enforcement Interviews of Juveniles policy for parental notification and juvenile rights information."

(j) The Alexander Juvenile Detention Center PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section 1.10 D., states, "The PREA investigator shall report the allegations of resident sexual abuse, along with the dispositions of the resulting investigations, to center management and the PREA Office, and enter appropriate information into TROI. All case records associated with allegations of resident sexual abuse and harassment, including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained as long as the alleged abuser is in secure custody, incarcerated or employed by the Department of Public Safety plus five (5) years. Data submitted for the Survey of Sexual Violence will be maintained for at least 10 years after the initial collection."

(k) Compliance is found in provision (i) of this standard.

(m) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 19, section 2.5., states, "The PREA Investigator and all others involved in the PREA process will strive to protect residents who make complaints of sexual abuse from retaliation, and assure the impartial resolution of PREA complaints in accordance with the Prison Rape Elimination Act of 2003, 42 U.S.C. § 15601, et seq. The PREA Investigator and all others involved in the PREA process, to the extent possible, will ensure the confidentiality of PREA complaints as well as all data collected through the investigation of those complaints except as required in the following circumstances: (1) to cooperate with law enforcement in any investigation and prosecution of the incidents alleged in such complaints; (2) to take and enforce disciplinary action against any staff member as a result of the incidents alleged in the complaints; (3) to defend against claims brought by the resident for violation of the resident's rights for having been subjected to sexual abuse; and (4) to otherwise comply with the law."

115.372	Evidentiary standard for administrative investigations
	<p data-bbox="242 145 742 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 438 300">Document Review:</p> <ol data-bbox="242 327 1476 414" style="list-style-type: none"> <li data-bbox="242 327 718 356">1. Alexander Juvenile Detention Center PAQ <li data-bbox="242 383 1476 414">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <p data-bbox="242 501 359 530">Interviews:</p> <ol data-bbox="242 557 486 586" style="list-style-type: none"> <li data-bbox="242 557 486 586">1. Facility Investigator <p data-bbox="242 613 1484 678">The interview with the facility investigator demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</p> <p data-bbox="242 763 1492 925">(a) The Alexander Juvenile Detention Center PAQ states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 18, section L.3, states, “The Division shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013
4. OPA-I30A Support Services Notification, dated 9.1.2014
5. OPA-I30 Support Services, dated 6.30.2014

Interviews:

1. Investigator
2. PREA Coordinator

Interviews with the PREA Coordinator and facility investigator demonstrated notification requirements to victims was given verbally and would be documented in TROI, the agency data base.

(a) The Alexander Juvenile Detention Center PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. In the last 12 months there have been zero criminal and or administrative investigations and zero residents were notified of outcomes.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 17, section 2.3 H. states, "The PREA Compliance Manager, with input from the Sexual Abuse Review Team, shall complete a post incident review within 30 days of the conclusion for all substantiated and unsubstantiated resident sexual abuse investigations."

The facility provided form OPA-I30A Support Services Notification informing the alleged victim whenever action is required for the alleged abuser.

The facility provided form OPA-I30, Support Services briefing the alleged victim on the role of the PREA Support Person and retaliation.

(b) The Alexander Juvenile Detention Center PAQ states If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident as to the outcome of the investigation. In the past 12 months, there has been zero investigations of alleged resident sexual abuse.

(c) The Alexander Juvenile Detention Center PAQ states following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the resident's unit;

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

There has not been a substantiated or unsubstantiated complaint of sexual abuse committed by staff against a resident in the last 12 months.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 8., section 1.8. A. 6, states, “Provide victim with a completed OPA-I30 (Victim Support Services form) to inform him/her of the results (status and outcome) of the investigation. Unless the incident is determined as unfounded, the PSP will inform the victim of the law enforcement outcome and the status of the staff member (assailant).”

(d) The Alexander Juvenile Detention Center PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 19, section N. 2-3, states, “Following an allegation that a resident has been sexually abused by a staff member (unless unfounded), the alleged victim shall be informed by the PSP whenever (1) the staff member is no longer posted in the resident's unit, (2) the staff member is no longer employed at the center, (3) the agency learns the staff member has been indicted on a charge related to sexual abuse within the center, or (4) the agency learns the staff member has been convicted of a charge related to sexual abuse within the center. Following an allegation that a resident has been sexually abuse by another resident, the alleged victim shall be informed by the PSP whenever: (1) the agency learns the alleged abuser has been indicted on a charge related to sexual abuse within the center, or (2) the alleged abuser has been convicted on a charge of sexual abuse within the center.”

(e) The Alexander Juvenile Detention Center PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In the past 12 months, there has been zero notifications to a resident, pursuant to this standard.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 19, section N.1., states, “The alleged victim shall be provided a completed OPA-I30 (PREA Support Services form) by the PSP with the results of the investigation.”

Note, the OPA-I30A Support Services form is used to document each type of notification to residents.

115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Memorandum from Deputy Secretary for Juvenile Justice, RE: Prison Rape Elimination Act Standards in Juvenile Facilities, dated 11.8.2021
4. NCDPS Memo RE: PREA Standards in Juvenile Facilities, dated 11.8.2021

Interviews:

1. PREA Compliance Manager
2. Program Director

Interviews demonstrated in the last 12 months, the facility had zero staff who was disciplined for violation of an agency sexual abuse or sexual harassment policy.

(a) The Alexander Juvenile Detention Center PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 12, section 1.14 A., states, "Employees: Staff shall be subject to disciplinary action up to and including termination for violation of Department of Public Safety sexual abuse or sexual harassment policies. Consequences will be commensurate with the nature and circumstances of the sexual abuse or harassment committed."

The facility provided a NCDPS Office Memorandum, subject: Prison Rape Eliminate Act (PREA) Standards in Juvenile Facilities (1.14 Discipline). This memo states, "The PREA Auditor requests an addition or clarifying language to existing policy for NC Juvenile Justice Facilities. As a result, please find the modifications below in relation to "Juvenile Justice Facilities Sexual Abuse and Harassment Policy: dated September 2013 (additional language underlined). This change will be incorporated into the aforementioned policy revision to be completed by the end of the year.

1.14 Discipline:

A. (Underlined language only) Staff who engage in sexual abuse shall immediately be prohibited form contact with residents and shall be reported to relevant licensing bodies or law enforcement agencies, unless the activity was clearly not criminal."

(b) The Alexander Juvenile Detention Center PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies.

(c) The Alexander Juvenile Detention Center PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment.

(d) The Alexander Juvenile Detention Center PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment.

115.377	Corrective action for contractors and volunteers
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 331 1469 470" style="list-style-type: none"> <li data-bbox="240 331 715 358">1. Alexander Juvenile Detention Center PAQ <li data-bbox="240 389 1469 416">2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 <li data-bbox="240 448 1043 474">3. NCDPS Memo RE: PREA Standards in Juvenile Facilities, dated 11.8.2021 <p data-bbox="240 560 352 586">Interviews:</p> <ol data-bbox="240 618 576 703" style="list-style-type: none"> <li data-bbox="240 618 576 645">1. PREA Compliance Manager <li data-bbox="240 676 464 703">2. Program Director <p data-bbox="240 734 1390 792">Interviews demonstrated during the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies.</p> <p data-bbox="240 882 1485 1043">(a) The Alexander Juvenile Detention Center PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, there have been zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of residents.</p> <p data-bbox="240 1133 1485 1294">NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 12, section 1.14 B., states, "Contractors and Volunteers: Any contractor or volunteer who engages in sexual abuse shall immediately be prohibited from contact with residents and shall be reported to relevant licensing bodies or law enforcement agencies, unless the activity was clearly not criminal. Consequences will be commensurate with the nature and circumstances of the sexual abuse or harassment committed."</p> <p data-bbox="240 1384 1485 1541">The facility provided a NCDPS Office Memorandum, subject: Prison Rape Eliminate Act (PREA) Standards in Juvenile Facilities (1.14 Discipline). This memo states, "The PREA Auditor requests an addition or clarifying language to existing policy for NC Juvenile Justice Facilities. As a result, please find the modifications below in relation to "Juvenile Justice Facilities Sexual Abuse and Harassment Policy: dated September 2013 (additional language underlined). This change will be incorporated into the aforementioned policy revision to be completed by the end of the year.</p> <p data-bbox="240 1630 395 1657">1.14 Discipline:</p> <p data-bbox="240 1688 1485 1809">B. Contractors and Volunteers: Any contractor or volunteer who engages in sexual ab use shall immediately be prohibited from contact with residents and shall be reported to relevant licensing bodies or law enforcement agencies, unless the activity was clearly not criminal. Consequences will be commensurate with the nature and circumstances of the sexual abuse or harassment committed."</p> <p data-bbox="240 1899 1485 2060">(b) The Alexander Juvenile Detention Center PAQ states the facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. The Alexander Juvenile Detention Center has not experienced an incident where a volunteer or contractor has engaged in sexual abuse or harassment; however, removal from facility premises and restricting access and possible termination of access would be the remedial measures.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013

Interviews:

1. Sexual Abuse Incident Team member/Program Director

Interviews with Program Director demonstrated residents who falsely reported PREA allegations would be disciplined if the opportunity presented.

(a) The Alexander Juvenile Detention Center PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months there have been zero administrative findings of resident-on-resident sexual abuse have occurred at the facility. In the past 12 months there have no criminal findings of guilt for resident-on-resident sexual abuse, occurring at the facility.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 12-13, section 1.14 C. 1-2, state, "Appropriate remedial measures shall be considered whether to prohibit further contact with residents in the case of any other violation of juvenile sexual abuse or sexual harassment policies. Are subject to consequences for sexual misconduct/offense pursuant to the Behavior Expectations policy following the established due process."

(b) The Alexander Juvenile Detention Center PAQ states in the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, the facility policy requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation receive daily visits from a medical or mental health care clinician. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation have access to other programs and work opportunities to the extent possible. In the past 12 months, zero residents were placed in isolation as a disciplinary sanction for resident on resident sexual abuse.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, "Consequences will be commensurate with the nature and circumstances of the sexual abuse or harassment committed, the resident's disciplinary history, and consequences imposed for comparable offenses committed by other residents with similar histories. It will be taken into consideration whether a resident's mental disabilities or mental illness contributed to the behavior when determining what disciplinary sanctions, if any, will be imposed.

NCDPS Juvenile Justice Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section 1.10 B., states, "Any housing concerns noted by staff regarding a resident's history of sexual abuse-victimization or sexually predatory behavior shall be communicated to the resident's center management. Center management shall use information obtained to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse. Residents may be isolated from others only as a last

resort when less restrictive measures are inadequate to keep them and other residents safe, and then only when alternative means of keeping resident's safe cannot be arranged. Any resident isolated for the purpose of sexual abuse prevention will receive daily visits from medical or mental health staff, have access to required educational programming, and have access to other programs to the extent possible.”

(c) Compliance substantiated in provision (a) of this standard.

(d) The Alexander Juvenile Detention Center PAQ states the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. Although the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility does not mandate whether to require the offending resident to participate in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives. Access to general programming or education is not conditional on participation in such interventions.

(e) The Alexander Juvenile Detention Center PAQ states the agency disciplines residents for sexual contact with staff only upon finding that the staff member did not consent to such contact. NCDPS Juvenile Justice Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 12-13, section 1.14 C 1-3, states,

1. Appropriate remedial measures shall be considered whether to prohibit further contact with residents in the case of any other violation of juvenile sexual abuse or sexual harassment policies.
2. Are subject to consequences for sexual misconduct/offense pursuant to the Behavior Expectations policy following the established due process.
3. Consequences will be commensurate with the nature and circumstances of the sexual abuse or harassment committed, the resident's disciplinary history, and consequences imposed for comparable offenses committed by other residents with similar histories. It will be taken into consideration whether a resident's mental disabilities or mental illness contributed to the behavior when determining what disciplinary sanctions, if any, will be imposed.

(f) The Alexander Juvenile Detention Center PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

(g) The Alexander Juvenile Detention Center PAQ states the agency prohibits all sexual activity between residents.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013
4. NCDPS Memorandum, RE: 115.331 Medical and Mental Health Screening, dated 10.22.2021
5. NCDPS Mental Health Consultation, not dated
6. Alexander Mental Health List, not dated

Interviews:

1. Mental Health Contractors

Interviews with the Mental Health Contractor demonstrated disclosure reports are reported to the mental health staff and follow up medical and or mental health appointments are scheduled for every intake, regardless of disclosure. Mental Health Contractor stated they had been told by a couple of clients that they have been sexually abused in their home or in the community. The mental health staff informed the client that they were a mandated reporter and that they would be notifying DSS. The mental health staff informed the supervisor on duty of the abuse and informed them that they would be notifying the local DSS. The DSS number is posted in the medical room. The mental health staff made the notification to DSS and followed up with an in person interview when the social worker arrived at the facility.

(a) The Alexander Juvenile Detention Center PAQ states all residents at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.341 are offered a follow-up meeting with a medical or mental health practitioner. Follow up meetings are offered within 14 days of the intake screening. In the past 12 months there has been 100 residents who disclosed prior victimization during the intake screening. Medical and mental health staff maintain secondary materials, documenting compliance with the above required services.

The facility provided a NCDPS Mental Health Consultation Form. This form documents:

- resident and resident family demographic information
- resident status with area Mental Health
- current consultation
- description of current status
- individual mental health notes

The facility provided an Alexander Mental Health Listing. This listing documents:

- resident name/date/race/sex/age
- alert
- watch
- regular
- threat

(b) The Alexander Juvenile Detention Center PAQ states all residents who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.341, are offered a follow-up meeting with a mental health practitioner. All residents are allowed a follow-up meeting offered within 14 days of the intake screening. In the past 12 months there have been 100 residents who disclosed previously perpetrated sexual abuse, as indicated during the screening process. Note: 100% of residents are seen by mental health upon admission, regardless of if they have disclosed, perpetrated or have been victimized.

NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 9-10, section B., states, "Any housing concerns noted by staff regarding a resident's history of sexual abuse-victimization or sexually predatory behavior shall be communicated to the resident's center management. Center management shall use information obtained to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse. Residents may be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only when alternative means of keeping residents safe cannot be arranged. Any resident isolated for the purpose of sexual abuse prevention will receive daily visits from medical or mental health staff, have access to required educational programming, and have access to other programs to the extent possible."

(c) The Alexander Juvenile Detention Center PAQ states the information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

(d) The Alexander Juvenile Detention Center PAQ states, medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

The Auditor strongly recommended the agency has a standard practice in place to document consents for residents 18 years and older.

115.382	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013 4. Mental Health Record, dated 6.2009 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random residents 2. Random staff 3. Medical Contractor <p>Medical staff state resident victims of sexual abuse would receive timely and unimpeded access to emergency medical treatment and crisis intervention services if a client were victimized at the facility. The contractor went on to state, fortunate, this detention center has not had an incident reported or occurred on-site.</p> <p>(a) The Alexander Juvenile Detention Center PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials used in such occurrences.</p> <p>The facility provided a Mental Health Record. This record records:</p> <ul style="list-style-type: none"> · Type of service to be provided · Arrival/Departure time · Total time · Juvenile's name · Session comments <p>(b) If qualified medical or mental health staff are not on duty, staff would follow the coordinated response checklist directives, which includes instruction to contact mental health practitioners.</p> <p>(c) The Alexander Juvenile Detention Center PAQ states resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>(d) The Alexander Juvenile Detention Center PAQ states treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013

Interviews:

1. Residents
2. Random staff
3. Mental Health

Interviews with medical and mental health staff demonstrated that residents are aware of access to emergency medical and mental health services. In the past of 12 months' residents have not reported sexual abuse.

Site Observation:

Throughout the facility, there is a multitude of sexual abuse community providers, pamphlets for students available to residents in the multipurpose room.

(a) The Alexander Juvenile Detention Center PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 24, section 3.2.1. C., states, "The acute medical evaluations shall be in full compliance with standards established through the "National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." [U.S. Department of Justice; Office on Violence Against Women (September 2004)]. Per this standard, the alleged sexual abuse victim(s) shall be granted access to a Sexual Assault Nurse Examiner (SANE) at the designated acute medical evaluation center;"

(b) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 27-27, section 3.3.1 states, "Following evaluation for sexual abuse, sexual harassment, and/or voyeurism within a center, alleged victim(s) shall be granted access to post-incident medical services through the center health services clinic which may include the following components:"

A. The alleged victim shall be informed of the scope and limits of confidentiality, with particular regard to information obtained during the post- incident medical care process;

B. The post-incident evaluation shall be in full compliance with professionally- accepted standards of care, and shall minimally include the following components:

1. Follow-up evaluation of all injuries sustained during alleged sexual abuse, sexual harassment and/or voyeurism incidents,
2. Testing for sexually transmitted per published Centers for Disease Control and Prevention (CDC) guidelines, as clinically indicated,
3. Treatment for all sexually transmitted infections identified, as clinically- indicated, and
4. Written documentation of: assessment; key findings, intervention; recommendations; and/or referrals.

(c) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 25-26, section 3.2.1. H., states, "The acute medical evaluators shall provide clearly written discharge instructions summarizing key findings, interventions, recommendations, and/or referrals, minimally including follow-up evaluation, as indicated (resolution of injuries; testing for sexually-transmitted infections; and/or pregnancy testing)."

(d) The Alexander Juvenile Detention Center PAQ states female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests is applicable.

(e) The Alexander Juvenile Detention Center PAQ states if pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services is applicable. Compliance is substantiated in provision (c) of this standard.

(f) The Alexander Juvenile Detention Center PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Compliance is substantiated in provision (b) of this standard.

(g) NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 9, section 1.9 C 1-6., states, "The PCM will conduct a Post Incident Review (PIR) after every sexual abuse investigation unless "unfounded". The PIR (OPA-110) will occur within 30 days of the conclusion of the investigation and a copy of the final PIR will be submitted to the PREA Office within 30 days of completion. The PCM will include a review team of management, supervisors, investigators, and medical/mental health providers to conduct the PIR. The review team will:

1. Consider if there is a need to change policy or practice;
2. Consider if the incident was motivated by race, ethnicity, gender identity, LGBTI identification, status, gang affiliation, or was motivated by group dynamics at the center;
3. Assess if physical barriers enabled abuse;
4. Assess adequacy of staffing levels;
5. Assess if monitoring technology should be deployed or supplemented; and
6. Prepare a report of findings, determinations, and improvement recommendations. If the center does not implement recommendations, reasons must be documented."

(h) The Alexander Juvenile Detention Center PAQ states the facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. NCDPS Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated September 2013
4. NCDPS Prison Rape Elimination Act (PREA) Post Incident Review (PIR), dated 9.24.2019

Interviews:

1. Program Director/Incident Review Team Member

An interview with the Program Director demonstrated sexual abuse incident reviews take place after each Administrative Investigation.

(a) The Alexander Juvenile Detention Center PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been zero criminal and zero administrative investigation of alleged sexual abuse completed at the facility.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 17, section 2.3 H., states, "The PREA Compliance Manager, with input from the Sexual Abuse Review Team, shall complete a post incident review within 30 days of the conclusion for all substantiated and unsubstantiated resident sexual abuse investigations."

The facility provided a NCDPS Prison Rape Elimination Act (PREA) Post Incident Review (PIR) OPA 110 form. This form instructs the PREA Compliance Manager to document the following:

- Facility / Incident Date
- Investigation Completion Date / Finding
- Did the allegation require a policy or practice change?
- Was the incident motivated by race, gender, ethnicity, gang affiliation, actual status, perceived status or LGBTI?
- During the assessment of the area where the incident allegedly occurred, were there any physical barriers that may have enabled sexual abuse?
- Are staffing levels in that area adequate during different shifts?
- Based on assessment, should additional monitoring technology be deployed or augmented?
- Additional comments and/or corrective action taken.
- Sexual Abuse Review Team Members names, position or classification
- Person completing report
- Review and approval
- Final review and approval

(b) The Alexander Juvenile Detention Center PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, there were zero criminal and one administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days.

(c) The Alexander Juvenile Detention Center PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 17, section 2.3 I., states, "The internal PREA investigation shall be completed and reviewed by Central Office in TROI within 30 days of the initial PREA report. An extension of an additional 30 days' maximum may be given by the Deputy Director for Center Operations in instances where the investigation requires additional time for the collection of evidence or determination of validity."

(d) The Alexander Juvenile Detention Center PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA compliance manager. All investigations are documented in the state TROI (Tracking and Reporting of Incidents) database.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 8, section 1.9.C., states, "The PCM will conduct a Post Incident Review (PIR) after every sexual abuse investigation unless "unfounded". The PIR (OPA-I10) will occur within 30 days of the conclusion of the investigation and a copy of the final PIR will be submitted to the PREA Office within 30 days of completion. The PCM will include a review team of: management, supervisors, investigators, and medical/mental health providers to conduct the PIR. The review team will:

1. Consider if there is a need to change policy or practice;
2. Consider if the incident was motivated by race, ethnicity, gender identity, LGBTI identification, status, gang affiliation, or was motivated by group dynamics at the center;
3. Assess if physical barriers enabled abuse;
4. Assess adequacy of staffing levels;
5. Assess if monitoring technology should be deployed or supplemented; and
6. Prepare a report of findings, determinations, and improvement recommendations. If the center does not implement recommendations, reasons must be documented."

(e) The Alexander Juvenile Detention Center PAQ states the facility implements the recommendations for improvement or documents its reasons for not doing so. Compliance is substantiated in provision (d) of this standard.

115.387	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. Agency website for Sexual Abuse Annual Report: <https://www.ncdps.gov/Adult-Corrections/Prison-Rape-Elimination-Act>
4. NCDPS Prison Rape Elimination Act Sexual Abuse Annual Report 2020
5. 2021 Census of Juveniles in Residential Placement

(a)/(c)-1,2

The Alexander Juvenile Detention Center PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section 1.10 D., states, "The PREA investigator shall report the allegations of resident sexual abuse, along with the dispositions of the resulting investigations, to center management and the PREA Office, and enter appropriate information into TROI. All case records associated with allegations of resident sexual abuse and harassment, including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained as long as the alleged abuser is in secure custody, incarcerated or employed by the Department of Public Safety plus five (5) years. Data submitted for the Survey of Sexual Violence will be maintained for at least 10 years after the initial collection."

The facility provided a memo to the Auditor with the agency web address: <https://www.ncdps.gov/Adult-Corrections/Prison-Rape-Elimination-Act>. The website demonstrates that the annual reports for the North Carolina Department of Public Safety has documentation of the necessary data to answer questions from the most recent version of the Survey of Sexual Violence (SSV) for years 2015 through 2020 for each of their adult and juvenile facilities.

(b) The Alexander Juvenile Detention Center PAQ states the agency aggregates incident-based sexual abuse data at least annually.

The facility provided aggregate data for years 2015 through 2020 in the annual report.

(d) The Alexander Juvenile Detention Center PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Compliance is substantiated in provision (a) of this standard.

(e) The Alexander Juvenile Detention Center PAQ states the agency does not contract for the confinement of residents.

(f) The Alexander Juvenile Detention Center PAQ states the Department of Justice has requested agency data for the year 2021.

The facility provided a completed 2021 Census of Juveniles in Residential Placement.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Alexander Juvenile Detention Center PAQ
2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013
3. Agency website for Sexual Abuse Annual Report: <https://www.ncdps.gov/Adult-Corrections/Prison-Rape-Elimination-Act>
4. NCDPS Prison Rape Elimination Act Sexual Abuse Annual Report 2020
5. 2021 Annual Incident Reporting Protocol Meeting, dated 8.20.2021

Interview/Site Observation:

1. PREA Coordinator

An interview conducted with the PREA Coordinator and review of the 2020 Agency Annual Report demonstrated the report is developed annually with a comparison of annual numbers from previous years.

(a) The Alexander Juvenile Detention Center PAQ states the agency reviews data collected and aggregated pursuant to §115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including:

- Identifying problem areas;
- Taking corrective action on an ongoing basis; and
- Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.

The facility provided a completed 2021 Annual Incident Reporting Protocol Meeting document. The document records:

- Stakeholder attendance
- Supporting documentation
- o Reporting Abuse and/or Neglect (DJJDP6)
- o Law enforcement notification and requests for charges to be filed (MD4.1)
- o Commitment to quality of care (PREA (YDC) Letter (Form YC 061) Detention Statement
- o PREA Q&A
- o Juvenile Brochure titled "Expect Respect"
 - Discussions with Law Enforcement
 - Review with Law Enforcement
 - Talking points
 - Communication Issues
 - DSS Reports/Findings
 - Escapes

· Check List of Reportable Incidents and Protocol

(b) The Alexander Juvenile Detention Center PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

(c) The Alexander Juvenile Detention Center PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head.

(d) The Alexander Juvenile Detention Center PAQ states 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.

115.389	Data storage, publication, and destruction
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 435 300">Document Review:</p> <ol data-bbox="240 331 1469 501" style="list-style-type: none"> 1. Alexander Juvenile Detention Center PAQ 2. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, dated June 2013 3. Agency website for Sexual Abuse Annual Report: https://www.ncdps.gov/Adult-Corrections/Prison-Rape-Elimination-Act> <p data-bbox="240 595 352 622">Interviews:</p> <ol data-bbox="240 654 480 680" style="list-style-type: none"> 1. PREA Coordinator <p data-bbox="240 712 1453 770">Through interviews with the PREA Coordinator he demonstrated the data is secured on the Agency's secure intranet with limited access to Department Supervisory staff. Aggregate, redacted data is available on the agency website.</p> <p data-bbox="240 855 1485 1151">(a) The Alexander Juvenile Detention Center PAQ states the agency ensures that incident-based and aggregate data are securely retained. NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section 1.10 D., states, "The PREA investigator shall report the allegations of resident sexual abuse, along with the dispositions of the resulting investigations, to center management and the PREA Office, and enter appropriate information into TROI. All case records associated with allegations of resident sexual abuse and harassment, including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained as long as the alleged abuser is in secure custody, incarcerated or employed by the Department of Public Safety plus five (5) years. Data submitted for the Survey of Sexual Violence will be maintained for at least 10 years after the initial collection."</p> <p data-bbox="240 1236 1453 1330">(b) The Alexander Juvenile Detention Center PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p data-bbox="240 1415 1469 1680">NCDPS Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document, page 10, section D. states, "The PREA investigator shall report the allegations of resident sexual abuse, along with the dispositions of the resulting investigations, to center management and the PREA Office, and enter appropriate information into TROI. All case records associated with allegations of resident sexual abuse and harassment, including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained as long as the alleged abuser is in secure custody, incarcerated or employed by the Department of Public Safety plus five (5) years. Data submitted for the Survey of Sexual Violence will be maintained for at least 10 years after the initial collection."</p> <p data-bbox="240 1765 1469 1863">(c) The Alexander Juvenile Detention Center PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected pursuant to §115.387 for at least 10 years after the date of initial collection, unless Federal, State or local law requires otherwise.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1508 255">Auditor Discussion</p> <p data-bbox="229 255 1508 318">(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p data-bbox="229 318 1508 380">(b) This is the third audit cycle for Alexander Juvenile Detention Center and the third year of the third audit cycle.</p> <p data-bbox="229 380 1508 443">(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p data-bbox="229 443 1508 551">(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p data-bbox="229 551 1508 613">(m) The Auditor was permitted to conduct private interviews with residents.</p> <p data-bbox="229 613 1508 721">(n) Residents permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(b) The agency has posted the current 2017 PREA audit report, on their website.

Appendix: Provision Findings		
115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.312 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	na

115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? (N/A for non-secure facilities)	yes
115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes

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

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

115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	yes
115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes
115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes

115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.317 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.318 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.321 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	yes

115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes
115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

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

115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.335 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (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 juvenile victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.335 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.335 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (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

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (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
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (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
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes
115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes
115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.352 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes

115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.366 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes

115.367 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes
115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes

115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes
115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes

115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.373 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes

115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.376 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.376 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes

115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes
115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes

115.381 (c)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes

115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	yes
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	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.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. 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.)	yes