

PREA Facility Audit Report: Final

Name of Facility: Pitt Regional Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/03/2020

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: Dorothy Xanos	Date of Signature: 04/03/2020

AUDITOR INFORMATION	
Auditor name:	Xanos, Dorothy
Address:	
Email:	dxconsultants@gmail.com
Telephone number:	
Start Date of On-Site Audit:	01/29/2020
End Date of On-Site Audit:	01/30/2020

FACILITY INFORMATION	
Facility name:	Pitt Regional Juvenile Detention Center
Facility physical address:	451 W. Belvoir Hwy., Greenville, North Carolina - 27834
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Tara Gilbert
Email Address:	tara.gilbert@ncdps.gov
Telephone Number:	252-830-6590

Superintendent/Director/Administrator	
Name:	Kimberley Dupree Melvin
Email Address:	kimberly.dupree@ncdps.gov
Telephone Number:	252-830-6590

Facility PREA Compliance Manager	
Name:	Tara Gilbert
Email Address:	tara.gilbert@ncdps.gov
Telephone Number:	O: (252) 902-6616

Facility Health Service Administrator On-Site	
Name:	Harry Arthur
Email Address:	harry.arthur@ncdps.gov
Telephone Number:	252-830-6590

Facility Characteristics	
Designed facility capacity:	18
Current population of facility:	15
Average daily population for the past 12 months:	14
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	
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:	26
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:	5

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:	919-733-2126

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

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

AUDIT FINDINGS

Narrative:

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

The PREA audit of the Pitt Regional Juvenile Detention Center (Pitt RJDC) was conducted on January 29-30, 2020 by Dorothy Xanos, US DOJ Dual Certified PREA Auditor. The audit begins with the notification of the on-site audit was posted by December 18, 2019 six weeks prior to the date of the on-site audit. The facility's last PREA audit was on March 13-14, 2017. The posting of the audit notices both English and Spanish versions was verified during the tour and verified by photographs received in an email from the Detention Center Supervisor/PREA Compliance Manager (PCM). The audit notices explained correspondence would be treated as legal mail to ensure confidentiality and privacy. The photographs indicated notices in both English and Spanish versions were posted in various locations throughout the facility including the front entrance door, intake room, and A & B housing wings. Throughout all the audit phases, the auditor did not receive any communication from the staff or from residents as a result of the posted notices.

The auditor completed a documentation review using the Pre-Audit Questionnaire, policies, procedures, internet research, and supporting documentation for all forty-one (41) standards. The information necessary for the audit was provided on the PREA Online Audit System (OAS) received by December 31, 2019. The documentation uploaded to the OAS for each standard contained the supporting documentation in-regards to the Pre-Audit Questionnaire, however the information did not sufficiently address ten (10) standards. Additional information reviewed included the agency's and facility's mission statements, daily population reports for the past twelve (12) months and the facility's schematic. The supporting documentation on the ten (10) standards was provided to the auditor during the on-site and after the facility's on-site visit. The supporting documentation was uploaded to the OAS under the supplemental files.

A conference call was conducted on January 16, 2020 with the Facility Director, Detention Center Supervisor/PREA Compliance Manager and NCDPS PREA Program Coordinator to review the schedule for the on-site visit, discuss the auditor's results of the Pre-Audit Questionnaire and supporting documentation provided on the OAS and review information to be sent to the auditor prior to the on-site visit to the facility. The Detention Center Supervisor/PCM sent the documentation (staff roster, staff schedule for random and specialized staff) to the auditor prior to arrival to the facility. Also, supporting documents were provided during the on-site visit to address the deficiencies and are summarized in the report under the related standards.

The on-site audit was conducted on January 29-30, 2020. An entrance briefing was conducted with the Facility Director, Detention Center Supervisor/PCM, NCDPS PREA Director and NCDPS PREA Program Coordinator. During the entrance briefing, the audit process was explained and a tentative schedule for two (2) days to include conducting interviews with the staff and residents and reviewing the documentation. A complete guided tour of the detention center was conducted including the secure lobby area, administrative offices, intake area, storage area, classroom area, teacher office, medical office,

control room, kitchen and pantry, multi-purpose/activity/dining area, outdoor recreation area, laundry/storage area, and eighteen (18) single cells.

During the tour, residents were observed to be under constant supervision of the staff while involved in various activities. Notification of the PREA audit was posted in all locations throughout the facility as well as postings informing residents of the telephone numbers to call and report sexual abuse and sexual harassment and to call the victim advocate for emotional support services. The auditor reviewed the logbook containing PREA related documentation (unannounced rounds). Also, the auditor observed cameras and the video surveillance system which enhances the staff's capabilities to assist in monitoring blind spots and the review of incidents. There are cameras installed in a number of areas throughout the facility. There were no cameras installed in the bathroom/shower area, so residents are not seen on the surveillance system while showering or toileting. During the tour, it was observed the bathroom and shower areas in both housing wings did allow for privacy.

During the two (2) day on-site visit, there were a total of fifteen (15) male and female residents in the facility. Ten (10) residents were randomly selected from both housing wings with a resident list provided by the Detention Center Supervisor/PCM for the interview process. The facility did not have any residents identified in the required categories i.e. physical disability (Blind, Deaf or Hard of Hearing); Limited English Proficient (LEP); a resident who identify as Lesbian, Gay or Bi-sexual; Transgender or Intersex; resident with a cognitive disability; resident in isolation; who reported sexual abuse and who reported sexual victimization during risk screening. All resident interviews indicated they were well informed of their right to be free from sexual abuse and sexual harassment and how to report sexual abuse and sexual harassment using several ways of communication such as trusted staff, administrative staff, sending correspondence, calling the DSS hotline number and the grievance process. Also, random file reviews of medical, mental health and resident records and additional documentation were completed as well.

The community victims' advocacy services address and telephone number are available to the residents located throughout the facility. There is evidence of the Facility Director obtaining a Memorandum of Agreement with the Real Crisis Intervention, Inc dated 2/09/20 to provide the victim advocacy services for the residents who are sexual assault victims, provide free confidential crisis intervention and emotional support services related to sexual abuse or sexual assault who are calling the toll-free telephone number at the facility. Also, the auditor contacted a representative from Real Crisis Intervention, Inc via telephone during the on-site visit and confirmed the rape crisis center has established a telephone number for residents to call and to provide emotional support services. Vident Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim. Real Crisis Intervention, Inc's representative indicated there have been no calls from residents in the past twelve (12) months requesting emotional support services related to sexual abuse or sexual assault at the facility.

Eighteen (18) staff were formally interviewed including (7) staff from all three (3) shifts (supervisory and floor staff) Facility Director/investigative; Detention Center Supervisor/PCM/retaliation; upper level management/incident review team; (1) medical staff; (1) mental health staff; (1) human resources; (1) first responder/intake; (1) risk screening staff; (1) educationist specialist and (1) religious volunteer were interviewed during the two (2) days of the on-site visit and several days after the on-site visit. Additionally, interviews were conducted via telephone with the NCDPS Secretary's representative and NCDPS PREA Coordinator prior to the on-site visit. Overall, the interviews revealed the staff is knowledgeable of the PREA standards and were able to articulate their responsibilities and their mandated duty to report.

At the end of the second day, an exit briefing with a summary of the findings was conducted with the Facility Director, Detention Center Supervisor/PCM, NCDPS Facility Operations Standard Manager and via telephone the NCDPS PREA Program Coordinator. At the exit debriefing, the auditor gave an overview of the audit and commented on the on-site observations, interviews, and summarized the strengths and weaknesses after completing the Pre-Audit and On-Site Audit phases. Based on the findings during the Pre-Audit and On-Site Audit phases, the auditor needed to complete the full evaluation during the evidence review phase of the PREA audit by reviewing all evidence collected, including policies and procedures, observations of routine practices in the facility, what the auditor learned in the course of interviewing staff and residents, and documentation obtained while on-site in order to make a compliance determination for each standard resulting in a final report.

Also, during the exit briefing there was a discussion to send the auditor additional documentation for three (3) standards and it was determined this information would be sent to the auditor within the next two (2) weeks for compliance with all the PREA standards. The requested information was sent to the auditor by the NCDPS PREA Program Coordinator prior to the submission of this report. The auditor reviewed all requested information and the facility is in full compliance with the PREA Standards.

AUDIT FINDINGS

Facility Characteristics:

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

Pitt Regional Juvenile Detention Center (Pitt RJDC) is an eighteen (18) bed secure detention facility for male and female residents governed by North Carolina Department of Public Safety (NCDPS). The detention center was opened in March 19, 1985 with a maximum population of ten (10) juveniles to serve several counties in eastern and northeastern North Carolina. Nine (9) years later, the detention center was expanded to an eighteen (18) bed facility. Pitt RJDC provides short term care for juveniles pending adjudication and/or disposition and commitment by the court or who are pending committed placements to a youth development center or transfer to another jurisdiction or agency. The average age is between 11-18 years old although juvenile jurisdiction could remain until the age of 21 and the average length of stay is fifteen (15) days. There were fifteen (15) male and female residents at the detention center at the time of the review.

Pitt Regional Juvenile Detention Center (Pitt RJDC) is located in Greenville, North Carolina. The facility was opened in 1985 and consists of secure lobby area, administrative offices, intake area, storage area, large classroom area with four (4) single cells and a bathroom/shower area, teacher office, medical office, control room and on the other side of the building, large multi-purpose (activity/classroom) area with fourteen (14) single cells, kitchen and pantry, laundry/storage area, two (2) bathroom/shower area an outdoor recreation area and designated visiting areas. The detention center is video monitored and recorded to ensure safety and security of all residents. The open floor plan has little to no blind spots and all areas are easily monitored by the control room except for the bathroom/shower areas. Residents have the capability to quietly read in their rooms if not interested in an outdoor activity. Pitt RJDC's fully trained detention staff assist the residents with the admission and coping with being detained at the detention center. Daily physical and mental activities are implemented. Programs and activities are offered to stimulate the residents to think, listen, learn and act responsibly. In addition, the detention staff provides life skills, coping skills, and setting goals as key tools to get the resident back on track.

The detention center is staffed with twenty-nine (29) full-time and part-time employees. The certified detention staff consisted of: Facility Director; (2) Detention Center Supervisors; Human Services Coordinator; (18) Youth Counselor Technicians, (3) non-certified staff (Administrative Assistant; Education Specialist and Food Service Staff) and four (4) staff vacancies.

The medical services consist of contracted medical staff (Greenville Healthcare) providing nursing services 2-3 times per week and available 24/7. The detention center has agreements with the Vident Medical Center for 24-hour emergency services. Also, the nurse provides health education and counseling about a variety of health topics. The medical staff provides medical care to include: completing the initial medical assessment, review intake referrals, routine and additional lab work as ordered, STD testing and treatment as indicated, updating immunization records, seasonal flu vaccinations, routine eye exams, dietary services and referrals, administration of medications/treatments as prescribed, assessments of resident injuries and treatment as required, medical assessments and monitoring with any restraint, assessments of somatic health complaints with treatment as indicated,

develop treatment plans and provide medical discharge plans. There are contracted licensed mental health clinicians (PORT Health Service) that come to the detention center on an as needed basis to screen for suicide risk in new admissions, substance abuse services and for one-on-one counseling with the residents.

The educational department consists of an education specialist providing educational services licensed by the N.C. Department of Public Instruction. Following required State law all educational staff in "licensed" positions holds the appropriate licensure for their subject(s), grade level(s) or professional assignment(s). Upon arrival to the detention center each resident under goes a series of questions to determine their level of performance and then given assignments based on the results of the questions. The residents participate in an individual education program that is designed for them. The detention center provides an educational program during the week in order for residents to maintain their grades and the continuity of care upon return to their community schools. The program is designed for residents to have the opportunity to learn at the highest level possible. The instructional program encourages the residents to explore their abilities to learn, understand their cultural backgrounds, and enhance their future. Residents receive instruction in life skills, English, mathematics, social studies and science. Special Education services are offered to residents who qualify and counseling services are offered to all residents. During the school day, residents participate in a one hour structured physical activity which is led by a detention staff member. If a resident prefers not to participate in the physical activity they may go to their room during that time without a consequence.

Along with educational services, the detention center offers nutritional services that promote a healthy lifestyle and volunteer services that include student interns from East Carolina University, and other colleges in the area. Pitt RJDC provides religious services several times during the week and the resident's participation is optional. Church services are scheduled every Sunday or Monday by various local church groups. The detention center has at least five (5) volunteers who provide religious or educational literacy (who work with multiple facilities around the North Carolina area).

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). 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.

Number of standards exceeded:	2
Number of standards met:	37
Number of standards not met:	0
Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.	4

Standards Exceeded

Number of Standards Exceeded: 2

List of Standards Exceeded: 115.311, 115.331

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
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 and NC General Statute 14-27.31 (Sexual Activity by a Substitute Parent or Custodian) outlines how each facility implements its approach to preventing, detecting and responding to all allegations of sexual abuse and sexual harassment, including the definitions of prohibited behaviors as well as sanctions or staff, contractors, volunteers and residents who had violated those prohibitions. Additionally, the policy provided comprehensive guidelines and a training foundation for implementing each facility's approach to include the zero tolerance towards reducing and preventing sexual abuse and sexual harassment of residents. NCDPS's PREA Office has also required each facility director statewide to designate at their facility a primary and an alternate PREA Compliance Manager. A review of both organizational charts contained the designations of the PREA Coordinator and PREA Compliance Manager positions.</p> <p>NC Department of Public Safety has a designated PREA Coordinator, her official title is PREA Director and she reports directly to the Chief Deputy Secretary for the Division of Professional Standards Policy & Planning. An interview with one of the PREA Program Coordinators confirmed the PREA Director/PREA Coordinator works statewide to implement the PREA Standards and has sufficient time and authority to develop, implement and oversee the agency's efforts toward PREA compliance of over sixty-nine (69) facilities with the support of the Department. The PREA Director/PREA Coordinator is responsible for coordinating comprehensive PREA responses including technical and administrative guidance, creation of supporting policies and practices, interpretation relative to PREA implementation, design and modification of training, programming, investigation and analysis, ensuring proper reporting, trend evaluation and provision of recommendations for improvement and compliance. The PREA Director has three (3) PREA Program Coordinators who report to her and are responsible for providing assistance to their assigned facility's PREA Compliance Managers. The PREA Director/PREA Coordinator meets with her entire team monthly to discuss issues and she maintains contact with the PREA Program Coordinators and all PREA Compliance Managers through training, telephone, email or Webex throughout the year.</p> <p>The three (3) PREA Program Coordinators are responsible for coordinating their facility's comprehensive PREA response including technical and administrative guidance, creation of supporting policies and practices, interpretation relative to PREA implementation, design and modification of training, programming, investigation and analysis, ensuring proper reporting, trend evaluation and provision of recommendations for improvement and compliance.</p> <p>The Pitt RJDC's Facility Director completed a memorandum on July 5, 2017 to the NCDPS PREA Office, her designation of two (2) Detention Center Supervisors as her primary and alternate PREA Compliance Managers. Pitt RJDC's PREA Compliance Manager during her interview indicated she had sufficient time and authority to develop, implement and oversee the facility's PREA compliance efforts to comply with the PREA standards.</p>

Based on the randomly selected staff, specialized staff and resident interviews, the extensive staff training, the resources available to the facilities, it is evident, the executive administration has taken the PREA Standards to another level and it is reflected in their commitment to protecting the residents in their care throughout the State of North Carolina. Also, during the tour of the facility, the observation of bulletin boards, posters, reviews of staff and resident handbooks, training curriculums confirmed the facility's commitment and dedication to create a PREA compliant culture. The facility has a PREA reference binder located in the supervisor's office of the facility that contain the reporting process and forms for the facility staff in the event of an incident.

Overall, the auditor has determined the agency and the facility have substantially exceeded the requirements of this standard based on the above information.

Policy and Supporting Documents Reviewed, Interviews and Observations:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document
- NC General Statute 14-27.7 (Intercourse and sexual offenses with certain victims; consent no defense)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- PREA Coordinator (PREA Director) Description and Qualifications
- PREA Program Coordinator Description and Qualifications
- Facility PREA Compliance Manager Designation and Qualifications
- Agency/Department Organization Chart
- Facility Organization Chart
- PREA Program Coordinator interview
- PREA Compliance Manager Interviews
- Facility Tour

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>An interview with the PREA Director (PREA Coordinator) and a review of documentation confirmed the North Carolina Department of Public Safety Prisons (NCDPS) does not contract for the confinement of residents with private entities or other entities including other government agencies, therefore this standard is not applicable to this facility.</p> <p>Interview and Supporting Documents Reviewed:</p> <ul style="list-style-type: none"> • PREA Standards Compliance Checklist • NCDPS's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • PREA Director (PREA Coordinator) Interview

115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.12 (Staffing) and GS 143B-709 (Security Staffing) contained the required information identifying the facility to develop a staffing plan, to provide for adequate staffing levels to ensure the safety and custody of residents, account for departmental resident to staff ratios, physical plant, video monitoring, and federal standards. Also, the policies contained information identifying the facility shall comply with staffing requirements including exigent circumstances and supervisory staff conducting unannounced rounds on a weekly basis during all shifts documenting the information in all logbooks, shift notes and “Unannounced Monitoring Reports” that contains observations of all areas of the facility on a monthly basis.</p> <p>According to the policy, Pitt RJDC’s staff-to-youth ratios are identified as 1:8 during the resident waking hours and sleeping hours. Pitt RJDC’s staffing plan was developed, implemented and approved October 16, 2019 and in compliance with the standard. An interview with the Facility Director and the documentation confirmed on an annual basis, there is a review of the facility’s staffing plan. During the initial documentation review, the facility did not report deviations from the staffing plan during the past twelve (12) months, their critical positions are always filled, it is a mandate, and minimum staff ratios are always maintained. The facility has a mechanism in place for call outs and staff volunteers to stay over if needed.</p> <p>The annual review completed by the Facility Director shall assess, determine, and document whether adjustments are needed to the facility’s established staffing plan, the facility’s deployment of video monitoring systems and other monitoring technologies and the resources the facility has available to commit to ensure adherence to the staffing plan. Identify the requirement of unannounced rounds to be conducted by an intermediate-level and higher-level supervisor and conduct these unannounced rounds on a weekly basis during all shifts. Supervisory staff is prohibited from notifying staff of unannounced rounds. Staff assigned to any post is prohibited from alerting other employees that a Detention Center Supervisor is conducting rounds to identify and deter sexual abuse and sexual harassment.</p> <p>Pitt RJDC is a secure facility and utilizes constant video and staff monitoring to protect the residents from sexual abuse and sexual harassment. The Facility Director and Detention Center Supervisors conduct and document unannounced rounds on all three (3) shifts and in all areas of the facility to monitor and deter staff sexual abuse and sexual harassment on a monthly basis. All unannounced rounds are documented in the logbook and an email is sent to the Facility Director that contains information and observations of all areas of the facility. During the facility tour, the auditor observed and reviewed the logbook, where unannounced rounds were documented including the staff identification, date and time. A review of the samples provided by the facility of random dates and both housing wings showed there was not a minimum of one (1) unannounced round conducted monthly by upper management staff on all three (3) shifts. Documentation, Facility Director and Detention Center Supervisor/PCM</p>

interviews did not confirm the process takes place on all three (3) shifts in the facility on a monthly basis.

After the on-site visit, the NCDPS PREA Program Coordinator sent the appropriate supplemental documentation (unannounced rounds) to the auditor demonstrating corrective actions had been taken with this standard prior to the submission of this report.

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews, review of documentation and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) - Section 1.12 (Staffing)
- GS 143B-709 (Security Staffing)
- 2019 Pitt RJDC's Staffing Plan
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Facility Staff Work Schedules
- Daily Population Report for the past twelve (12) months
- The facility's shift reports, video monitoring, and logbook
- Facility Director and Youth Counselor Supervisor/PCM interviews
- Facility tour
- Additional supplemental documentation for the corrective actions (unannounced rounds)

115.315	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.13 (Searches) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 2.7 (RJDC Admission Procedures) and NCDPS DJJ and Delinquency Prevention Policy dated 5/19/04 – Section YD/YC 3.2 (Searches, Population Count and Juvenile Supervision) required each facility to maintain protocols on limited pat down searches to same gender staff absent exigent circumstances, shower procedures, opposite gender announcing when entering housing areas, and prohibiting the search of a transgender or intersex resident solely for the purpose of determining the resident’s genital status. Also, policy requires all staff to document any cross-gender pat down searches.</p> <p>The NCDPS PREA Office in its “Campaign of Awareness” sent a memorandum dated April 22, 2013 to all Directors and Managers on the development of a Cross Gender bulletin board document and announcement to be displayed and shared with all staff. There is a requirement for all staff to sign and date the “Cross Gender Announcement and Acknowledgment” form acknowledging their completion of the orientation and limitations to cross gender viewing and searches. NCDPS has extensive staff training, a review of the training documentation including a “Safe Search Practices” power point and staff interviews confirmed training on pat down searches, cross-gender pat searches and searches of transgender and intersex residents are conducted in a respectful, professional manner and prohibiting cross-gender strip or cross-gender visual body cavity searches of residents.</p> <p>Random staff and resident interviews confirmed the staff of the opposite gender entering each housing wing consistently announces themselves. A review of the training documentation (curriculum and staff rosters) and staff interviews confirmed the annual training on pat down searches, cross-gender pat searches and searches of transgender and intersex residents are conducted in a respectful and professional manner and prohibiting cross-gender strip or cross-gender visual body cavity searches of residents. Staff interviews were able to describe what an exigent circumstance would be but were not knowledgeable of the procedures for securing authorization to conduct cross-gender pat searches as well as the requirements for justifying and documenting the searches.</p> <p>Random staff and resident interviews confirmed residents are able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them. Staff interviews identified the NCDPS policy on prohibiting staff from searching or physically examining a transgender or intersex resident for the purpose of determining that resident’s genital status. During the tour, it was observed the bathroom and shower areas in both housing wings did allow for privacy.</p> <p>Interviews with the Facility Director and Detention Center Supervisor/PCM confirmed there has been no cross-gender pat down searches, cross-gender strip or cross-gender visual body</p>

cavity searches of residents at the facility in the past twelve (12) months. Also, there have been no exigent circumstances of cross-gender pat down, strip or visual body cavity searches conducted of residents at the facility in the past twelve (12) months.

After the on-site visit, the NCDPS PREA Program Coordinator sent the appropriate supplemental documentation (training) to the auditor demonstrating corrective actions had been taken with this standard prior to the submission of this report.

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews, review of documentation and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) - Section 1.13 (Searches)
- NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 2.7 (RJDC Admission Procedures)
- NCDPS DJJ and Delinquency Prevention Policy – Section YD/YC 3.2 (Searches, Population Count and Juvenile Supervision)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- NCDPS New Employee Orientation
- NCDPS Trainer Power Point (LGBTQI Youth in Juvenile Facilities)
- NCDPS (Safe Search Practices)
- 2018-2019 Cross Gender Announcement & Acknowledgement forms
- Pre-Audit Questionnaire review - In the past 12 months, the number of cross-gender strip or cross gender visual body cavity searches of residents reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents that did not involve exigent circumstances or were performed by non-medical staff reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of transgender or intersex residents search or physically examine for the sole purposes of determining the resident's genital status was zero
- Facility tour
- Facility Director and Detention Center Supervisor/PCM interviews
- Random staff interviews
- Resident interviews
- Additional supplemental documentation for the corrective action (training)

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.10 (General Provisions) contained procedures to be taken to ensure residents with disabilities or who are limited English proficient have an equal opportunity and are provided meaningful access to all aspects of the facility’s efforts to prevent, protect and respond to sexual abuse and sexual harassment. Efforts shall include the use of interpreters, written material, or other formats or methods that ensure effective communication with resident’s disabilities, including residents who have intellectual disabilities, limited reading skills, who are blind or have low vision, deaf, or are Limited English Proficient (LEP). Also, the policy prohibits any facility to rely on resident interpreters, resident readers or any kind of resident assistants except in limited circumstances when an extended delay in obtaining interpreter’s services could compromise a residents’ safety, the performance of first-responder duties or the investigation of the resident’s allegations.</p> <p>NCDPS has established a contract with Linguistica International, Inc. for statewide services to provide residents with disabilities and residents who are limited English proficient with various interpreter services on an as needed basis. NCDPS DACJJ created a PREA brochure “Expect Respect: Your Safety in Juvenile Justice” and JJ Rack Card for the purposes of educating residents which includes information on suspicious behavior, reporting, prevention strategies, making false claims, sexual misconduct definitions, and retaliation. This brochure is available in English and Spanish. The facility’s staff provides the PREA education at intake and during orientation. Random staff interviews indicated the PREA education is provided in a manner to ensure the resident comprehends the material and it is read during the intake process. There are postings throughout the facility in English and Spanish. The staff training documentation including the Juvenile Educator Manual, “I Expect Respect: PREA Education Video for Youth” and NCDPS DACJJ pamphlet contained information on providing appropriate explanations regarding PREA to residents based upon the individual needs of the youth.</p> <p>Random staff interviews confirmed their knowledge of the outside agency providing services to the facility and would not rely on the use of resident assistants in relation to reporting allegations of sexual abuse or sexual harassment except in limited circumstances when an extended delay in obtaining interpreter’s services could compromise an residents’ safety, the performance of first-responder duties or the investigation of the resident’s allegations.</p> <p>During the on-site visit, there were no residents who were limited English proficient, or who were blind, deaf, or hard of hearing, or who had a cognitive disability. An interview with the Detention Center Supervisor/PCM indicated if a resident exhibit such a disability, arrangements will be made to provide the necessary and required assistance. Also, the facility’s contracted Licensed Mental Health Clinician (LMHC) indicated services are required and the staff would make the necessary accommodations beginning at the intake and orientation phase and throughout the resident’s length of stay. An interview with the Detention</p>

Center Supervisor/PCM confirmed in the past twelve (12) months, the facility did not have any instances of resident interpreters, assistance or readers being used for reporting allegations of sexual abuse or sexual harassment.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.10 (General Provisions)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Linguistica International, Inc.
- 2018-2019 Training Attendance
- NCDPS PREA Training 101 & 201 – power point
- I Expect Respect: PREA Education Video for Youth – power point
- NCDPS Juvenile Educator Manual
- PREA brochure “Expect Respect: Your Safety in Juvenile Justice” and JJ Rack Card
- NCDPS Sexual Abuse Awareness for the Offender brochure (English and Spanish)
- Detention Center Supervisor/PCM interview
- LMHC interview
- Random staff interviews
- Facility tour

115.317	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 and the Administrative Memorandum & Addendum dated 10-2013 from the Office of PREA Administration prohibits NCDPS staff to hire or promote anyone for a position that may have resident contact who has been engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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; or civilly or administratively adjudicates to have engaged 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. NCDPS shall consider any incidents of sexual abuse in determining whether to hire or promote anyone who may have contact with residents. All background checks are conducted initially on new employees, current and promotion decisions of employees and contractors. Material omission by an employee is subject to termination.</p> <p>NCDPS must ask all applicants and employees who may have contact with residents directly about previous misconduct noted above in written applications or interviews for hiring or promotions. Requires the information on substantiated allegations of sexual abuse or sexual harassment involving a former employee shall be furnished to any institutional employer in which the employee has applied to work provided the request in writing. Requires a criminal background records check shall be conducted before hiring new employees who may have contact with residents and will 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. Requires a continuing affirmative duty for employees to disclose any such conduct. Requires that a criminal background records check is completed prior to enlisting services of any contractor who may have contact with residents and a criminal background records check is completed at least every five (5) years for current employees and contractors.</p> <p>NCDPS has an extensive initial background screening requirements that include the screening for criminal record checks (AOC, DCI & NCDL), possible checks on criminal convictions and pending criminal charges, access to local, state and federal criminal databases to conduct background checks, driving records check, child abuse registry checks, domestic violence check, Diana screening - sex offender registry checks and best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse and any resignation during a pending investigation or an allegation of sexual abuse. The agency conducts 5-year background checks for all employees and contractors. There is an affirmative duty to disclose any arrests or previous misconduct within 24 hours.</p> <p>An interview with the facility's Administrative Specialist II confirmed the process on the facility performing the criminal background checks, considering the pertinent civil or administrative</p>

adjudications for all newly hired employees who may have contact with residents, all employees who are considered for promotion and every five (5) years. Additionally, volunteer and contractors who have contact with residents have documented criminal background checks. The personnel staff has a process to track all staff and their hire dates. Their central office provides information to requests from institutional employers where an employee has applied to work. They also conduct the same checks for contractors and volunteers. She advised that Central Office ensures background checks are conducted every five (5) years. Also, there is an affirmative duty to disclose any arrests or previous misconduct by all employees at hire and anytime there is a law enforcement contact.

A sampled review of staff's, volunteer's and contractor's HR files confirmed the process for the facility performing criminal background checks to consider the pertinent civil or administrative adjudications for all newly hired employees who may have contact with residents, all employees who are considered for promotion and every five (5) years. HR files are required to contain documentation on staff completing varied forms containing the questions regarding past misconduct (Applicant Verification form, Professional Reference Check, DPS Employment Statements and the PREA Notice and Information Collection for Current Employees) are completed during the hiring process. The HR staff sends the criminal background information to their Central Office and receives an email on whether an individual is approved or disqualified. Also, the auditor reviewed the NCDPS external website for employment and the new employment orientation manual dated 1/2019 available to staff and potential applicants.

A review of the DPS Employee Statements form (HR 013) and the Applicant Verification form (HR 005) contain the three (3) questions regarding sexual abuse or sexual activity in an institutional setting, community, or if the staff has been civilly or administratively adjudicated for the same, as well as a 24 hour requirement to disclose at their annual performance evaluation time. There is an affirmative duty to disclose any arrests or previous misconduct by all employees at hire and anytime there is a law enforcement contact within 24 hours. Once an individual is approved for hire, the new employee begins the LMS training and orientation process and is provided with a NCDPS New Employment Orientation Handbook.

Based on the review of the agency policy and procedures and information obtained through the documentation review, the agency has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P)
- Administrative Memorandum Addendum 10-2013
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Applicant Verification form
- Professional Reference Check form
- DPS Employment Statements form
- NCDPS New Employee Orientation Manual
- NCDPS website
- Pre-Audit Questionnaire review - In the past 12 months, the number of persons hired who may have contact with residents who have had criminal background checks: four

- Pre-Audit Questionnaire review - In the past 12 months, the number of contract for services where criminal background record checks were conducted on all staff covered in the contract that might have contact with residents: zero
- Administrative Specialist II interview

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 requires all designing or acquiring new facilities and in planning substantial expansion or modification of existing facilities to consider the effect of the design, acquisition, expansion, or modification upon the facility's ability to protect residents from harm, including sexual abuse. Requires any installing or updating of video monitoring systems, electronic surveillance systems, or other monitoring technology to be considered how such changes may enhance the facility's ability to protect residents from harm, including sexual abuse.</p> <p>An interview with the Pitt RJDC's Facility Director indicated there had been no major modifications but additional cameras were installed with an updated video monitoring system at the facility in the past twelve (12) months. During the tour, cameras were observed throughout the facility and the Facility Director brought up the video surveillance system on her desktop for the auditor to review. The video surveillance system will enhance their capabilities to assist in monitoring blind spots and the review of incidents. Additionally, this enables the staff to monitor residents more efficiently throughout the physical plant of the facility. The administrative staff is continually evaluating the electronic surveillance system and video monitoring.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through the interview and documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> ● North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document ● PREA Standards Compliance Checklist ● Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● Surveillance System Schematic and Diagrams ● Facility Director interview ● Facility tour

115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.1 (Reporting, Sexual Abuse and Harassment) and NC General Statute Chapter 15B (Victims Compensation Article 1 Crime Victim’s Compensation Act) requires, when requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member to accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information and referrals. A qualified mental health/counseling staff member or qualified community-based staff member includes an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. Requires a history be taken by a health care professional who will conduct a forensic medical examination to document the extent of physical injury. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. There will be no financial cost to the resident for this examination.</p> <p>Also, the NCDPS DACJJ policies and procedures require protocols for informed consent, confidentiality, reporting to law enforcement, and reporting to child abuse investigative agencies. Requires an administrative or criminal investigation conducted in accordance with PREA standards shall be completed for all allegations of sexual abuse and sexual harassment. All staff is required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation.</p> <p>Requires an administrative or criminal investigation for all allegations of sexual abuse and sexual harassment and requesting the investigating agency follow the requirements of PREA Standards. Additionally, the policies require protocols for informed consent, confidentiality, reporting to law enforcement, and reporting to child abuse investigative agencies. Documentation and random staff interviews confirmed Pitt County Sheriff’s Department (PCSD) conducts the criminal investigations, Department of Social Services (DSS) and the Office of Special Investigations (OSI) conducts the administrative investigations of allegations of sexual abuse and sexual harassment for residents under the age of 18 and DSS receive reports through their telephone number posted for residents at the facility. Residents are required to ask a staff member to utilize the telephone. The staff provides access to the telephone for a resident to call DSS privately. Residents 18 years of age are referred to the appropriate law enforcement agency to investigate allegations of sexual abuse and sexual harassment.</p> <p>There is evidence of Pitt RJDC’s Facility Director obtaining a Memorandum of Understanding with the Real Crisis Intervention, Inc. dated 2/09/20 to provide free confidential crisis intervention and emotional support services related to sexual abuse or assault residents at the</p>

facility. Any resident seeking services can call the toll-free telephone number. Also, the auditor contacted a representative from Real Crisis Intervention, Inc. via telephone during the on-site visit and confirmed the rape crisis center has established a telephone number for residents to call and to provide confidential emotional support services. She indicated there have been no calls from residents in the past twelve (12) months requesting emotional support services related to sexual abuse or assault. Also, the Real Crisis Intervention, Inc.'s representative indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process, investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. The Vident Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim.

NCDPS PREA Office sent a directive to all facilities to establish a standardized role of the PREA Support Person (PSP) that will serve as an advocate to link services (community based advocates or mental health professionals) and provide confidential emotional support to residents who report sexual abuse and sexual harassment by another resident, staff member, contractor or volunteer. The Facility Director has designated two (2) staff for this role and completed the required form (OPA-A18) on December 18, 2018. These individuals are screened for appropriateness to serve as a victim advocate and receive specialized training (PREA Support Person Training). Interviews with the facility and medical staff were knowledgeable of the procedures to secure and obtain usable physical evidence when sexual abuse is alleged. Also, staff interviews and training documentation confirmed the role of the PSP individual in the facility.

The facility has available the NCDPS DACJJ PREA brochure "Expect Respect: Your Safety in Juvenile Justice" and JJ Rack Card and Real Crisis Intervention, Inc. information that identifies for the residents to telephone or write. Documentation and interviews with the Facility Director and Detention Center Supervisor/PCM confirmed Pitt County Sheriff's Department (PCSD) conducts the criminal investigations of allegations of sexual abuse. Pitt RJDC's Facility Director interview confirmed in the past twelve (12) months, there has been no allegation where a victim required a forensic medical examination. Medical and mental health staff interviews indicated the facility will offer all victims access to forensic medical examinations without financial cost and the procedures to secure and obtain usable physical evidence when sexual abuse is alleged and confirmed in the event of an alleged sexual abuse occurrence. Also, the medical and mental health staff interviews confirmed residents would be transported Vident Medical Center for emergency and forensic medical examinations. Random staff interviews confirmed their knowledge on evidence protocol and their role as first responders and how to preserve evidence until local law enforcement officers arrived at the facility.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.1 (Reporting, Sexual Abuse and Harassment)

- NC General Statute Chapter 15B (Victims Compensation Article 1 Crime Victim's Compensation Act)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Pre-Audit Questionnaire review - In the past 12 months, the number of forensic medical exams conducted during the past 12 months reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of exams performed by SANE/SAFE during the past 12 months reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of exams performed by a qualified medical practitioner during the past 12 months reported was zero
- Memorandum of Understanding with Real Crisis Intervention, Inc.
- PREA brochure "Expect Respect: Your Safety in Juvenile Justice" and JJ Rack Card
- Real Crisis Intervention, Inc's representative interview
- Facility Director and Detention Center Supervisor/PCM interview and memorandum
- Random staff interviews
- Medical and mental health staff interviews

115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.11 (Allegation of Juvenile Sexual Abuse or Sexual Harassment at Former Center) requires all 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, and to document all such referrals. Requires notification to local law enforcement of all verified incident of sexual abuse of a resident by a staff member, contractor, or volunteer and sexual abuse between resident/resident shall be referred to the local law enforcement agency of jurisdiction for investigation and consideration of criminal prosecution. Requires that all investigators shall receive the general PREA training provided to all employees, and specialized training in conducting sexual abuse investigations in confinement settings that includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and criteria and evidence required to substantiate a case for administrative action or prosecution referral. Requires an administrative and/or criminal investigation for all allegations of sexual abuse or sexual harassment.</p> <p>All staff is required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation. All staff are required to refer all alleged incidents of sexual abuse or sexual harassment to the Department of Social Services (DSS) for investigation and determination of child abuse and Pitt County Sheriff’s Department (PCSD) for the determination of criminal charges. Also, staff refers all allegations of sexual abuse and sexual harassment to the Office of Special Investigations (OSI), the Central Office and the NCDPS PREA Office for completion of an administrative investigation. The appropriate information will be entered into their internal TROI system. The PREA policy can be found at the North Carolina DPS state's website and information can be found in their PREA pamphlet (Expect Respect: Your Safety in Juvenile Justice) available in English and Spanish. The parent/guardian is provided with an information packet identifying the zero tolerance to sexual abuse or sexual harassment, the DSS & NCDPS information on how to report and provided Real Crisis Intervention, Inc. information for emotional support services.</p> <p>Interviews with the Pitt RJDC’s Facility Director, Detention Center Supervisor/PCM and facility investigator confirmed the agency ensures an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. Also, any internal investigation that identifies criminal activity or a staff member is involved in criminal activity would be immediately referred to the Pitt County Sheriff’s Department (PCSD). The facility investigator would act in a liaison position and assist local law enforcement. The Pitt County Sheriff’s Department (PCSD) investigator informs Pitt RJDC’s Facility Director on the progress of a sexual abuse investigation.</p>

The Detention Center Supervisor/PCM tracks all the investigations at the facility. There is evidence of the Commissioner of Adult Corrections and Juvenile Justice sending a Memorandum dated 3/17/16 to the NC Sheriff's Association providing information on investigations being conducted in accordance with the PREA standards. Also, the Facility Director and Detention Center Supervisor/PCM interviews confirmed there had been no allegations of sexual abuse and sexual harassment resulting in administrative or criminal investigations in the past twelve (12) months. All random staff interviews confirmed their knowledge on the reporting, referral process and policy's requirements and the agency who conducts the administrative and criminal investigation in response to an allegation of sexual abuse and sexual harassment.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.11 (Allegation of Juvenile Sexual Abuse or Sexual Harassment at Former Center)
- Commissioner of Adult Corrections and Juvenile Justice's Memorandum
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Pre-Audit Questionnaire review - In the past 12 months, the number of allegations of sexual abuse and sexual harassment received during the past 12 months were zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of allegations resulting in an administrative investigation during the past 12 months was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of allegations referred for criminal investigation during the past 12 months was zero
- Specialized Investigations: Sexual Abuse and Harassment power point
- NCDPS state's website
- Facility Director interview
- Detention Center Supervisor/PCM interview
- Facility investigator interview
- Random staff interviews

115.331	Employee training
	<p data-bbox="252 170 928 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1485 573">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.4 (Employee Training) requires an in-depth PREA Training upon initially becoming an employee (entry level training) as well as refresher training annually.</p> <p data-bbox="252 629 1481 1211">All the PREA training provided to employees statewide contains all eleven (11) topics consistent with this standard’s requirements and is tailored to all facilities with the gender of their resident populations. These topics consist of: zero-tolerance policy, how to prevent, detect, report and respond to allegations of sexual abuse and sexual harassment, resident’s right to be free from sexual abuse and sexual harassment, staff and residents rights to be free from retaliation for reporting sexual abuse and sexual harassment incidents, dynamics of sexual abuse and sexual harassment in juvenile facilities, field offices, and community programs, common reactions of juvenile victims of sexual abuse and sexual harassment, 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, how to avoid inappropriate relationships with residents, how to communicate effectively and professionally with residents, including LGBTI, and gender nonconforming residents, and relevant laws regarding the applicable age of sexual consent. Also, the staff receives training on professional and ethical boundaries relating not only to PREA but to their role as an employee.</p> <p data-bbox="252 1267 1485 2029">All new employees receive the NCDPS Employee PREA brochure and sign the “PREA Acknowledgement Form” indicating they received the training and understand their responsibilities for all the different training modules and tested upon completion of the initial PREA training. All employees are trained as new hires regardless of their previous experience. A review of all staff and training education forms, including a power point presentation, lesson plan, and observation of the day-to-day operations as well as staff interviews confirmed staff receives PREA training during initial training and during refresher training. Also, the Detention Center Supervisor/PCM and random staff interviews confirmed their comprehension of the PREA training on how staff and residents can privately report sexual abuse and sexual harassment and their obligation in preventing, detecting and reporting any allegation of sexual abuse and/or sexual harassment. At the facility, it was evident through documentation, interviews and observation of the day-to-day operations the staff is trained continually about the PREA standards during shift briefings, monthly staff meetings, and the completion of various on-line and instructor led trainings. Additionally, the agency requires all staff to complete an annual in-service PREA training. Employee training records including curriculums are maintained electronically and certain training documents (NCDPS Human Resources on Boarding Checklist form and PREA Acknowledgement Form) are maintained in their personnel file.</p> <p data-bbox="252 2085 1461 2152">Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and the review of detailed documentation during the on-site</p>

visit and facility tour, the facility has demonstrated exceeding this standard. The agency requires all staff to receive formal PREA training annually.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.4 (Employee Training)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- NCDPS PREA 101 power point
- NCDPS PREA 201 power point
- NCDPS Lesson Plan – Staff and Offender Relationships
- Daily Dozen
- New Employee Orientation
- Red Flag Poster
- NCDPS PREA Acknowledgement forms
- Detention Center Supervisor/PCM interview
- Random staff interviews

115.332	Volunteer and contractor training
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 907">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.5 (Training for Volunteers, Custodial Agents, Contractors, and Other Persons Providing Services to Residents) requires 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, detention, and response policies and procedures. The level and type of training provided shall be based on the services they provide and the level of contact they have with residents, but all volunteers and contractors who have contact with residents shall be notified of the agency’s zero tolerance policy regarding sexual abuse and sexual harassment and be informed how to report such incidents. All volunteers, interns and contractors receive the PREA training, PREA Volunteer brochure and sign the “PREA Acknowledgement Form” upon completion of their PREA training.</p> <p data-bbox="252 963 1484 1377">Documentation (curriculum & video) was reviewed for content and addresses the zero-tolerance policy, volunteer and contractor requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment. The facility reports ten (10) volunteers and contractors who may have access to residents. A review of randomly selected individual volunteer and contractor files contained a signed and dated acknowledgement form that the volunteer and/or contractor completed and understood their requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment. Interviews with a volunteer (religious) and a contractor (education specialist) confirmed their knowledge of the PREA training and NCDPS’s zero tolerance of any form of sexual activity at the facility as well as their duty to report sexual abuse or sexual harassment.</p> <p data-bbox="252 1433 1484 1556">Based on the review of the agency policy and procedures, observations and information obtained through the volunteer (religious) and contractor (education specialist) interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1612 1212 1646">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="295 1724 1476 2139" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.5 (Training for Volunteers, Custodial Agents, Contractors, and Other Persons Providing Services to Residents) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • NCDPS PREA 101 power point • NCDPS PREA 201 power point • NCDPS PREA Acknowledgement forms • Volunteer (religious) and contractor (education specialist) interviews



115.333	Resident education
	Auditor Overall Determination: Meets Standard
	<p data-bbox="252 241 523 280">Auditor Discussion</p> <p data-bbox="252 324 1484 958">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.6 (Resident Education) requires mandatory PREA information, both orally and in writing for residents to receive comprehensive age appropriate education information regarding safety, background information on PREA, prevention/intervention, self-protection, reporting and treatment/counseling, and confidentiality. During the intake process provide residents education on the zero-tolerance policy and how to report incidents or suspicions of sexual abuse and sexual harassment. Requires within ten (10) days of arrival residents receive information regarding their right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. However, the assigned facility staff provides the residents with this information immediately upon arrival during their initial intake and orientation process. Also, the facilities are required to provide the PREA information for Limited English Proficient residents, and those with disabilities such as limited reading skills, deaf or visually impaired.</p> <p data-bbox="252 1008 1484 1691">During the initial intake, the assigned staff utilizes the Juvenile Educator Manual and the “PREA Juvenile Sequence Checklist” form to review detailed information verbally with the resident and the resident signs the “Juvenile PREA Education Acknowledgement” and the “Expect Respect PREA Education Video” forms verifying receipt for all information regarding orientation to the facility. Also, the resident observes the PREA video and the assigned staff reviews it with them. A follow-up is completed within ten (10) days of the resident’s arrival to the facility. All residents are provided resident PREA education and NCDPS “Sexual Abuse Awareness for the Offender” brochure which is available in English and Spanish. The information includes their right to be free from sexual abuse and sexual harassment, how to report, their right to be free from retaliation for reporting sexual abuse or sexual harassment, prevention/intervention, self-protection, reporting and treatment/counseling. Also, the assigned staff presents PREA information in a manner that is accessible to all residents and provides education on an ongoing basis individually or in a group session to the residents. An interview with one (1) of the Youth Counselor Technicians confirmed the above practices and indicated in most instances the initial intake and orientation is completed within the first several hours of their arrival and the PREA Video is observed within 2 to 3 days.</p> <p data-bbox="252 1736 1484 2150">Documentation review of resident records contained the required forms (Student PREA Education & Training and Juvenile PREA Acknowledgement). Residents are provided a NCDPS “Expect Respect” brochure which includes information on prevention intervention, self-protection, reporting and treatment/counseling and is available in Spanish for future reference. Residents interviewed stated they received this information the same day they arrived at the facility and identified the receipt of the brochure. Also, residents indicated they observed a video several days later. The staff presents PREA information in a manner accessible to all residents and provides education on an ongoing basis individually or in a group session. The parent/guardian is provided a packet with detailed information on PREA and the resident’s orientation to the facility. PREA postings were observed during the facility tour in both housing</p>

wings, common areas and residents identified the postings as another source of information for them.

Based on the review of the agency policy and procedures, observations and information obtained through the staff and resident interviews and documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.6 (Resident Education)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Resident files – “Student PREA Education & Training and Juvenile PREA Acknowledgement” and “Expect Respect PREA Education Video forms
- NCDPS “Sexual Abuse Awareness for the Offender” brochure (English and Spanish)
- Juvenile Educator Manual
- Youth Counselor Technician interview
- Resident interviews

115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.3 (Investigations) requires the executive administration to ensure all investigators are properly trained in conducting investigations in confinement settings. The required training includes: Techniques for interviewing sexual abuse victims; Proper use of Miranda and Garrity Warnings; Sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative or prosecution referral.</p> <p>All investigators undergo an extensive training developed by the NCDPS PREA Office prior to conducting administrative investigations which includes the NCDPS PREA Specialized Investigations: Sexual Abuse and Sexual Harassment. The facility’s PREA investigators when assigned conduct administrative investigations. There is one (1) staff at the facility who has completed the NCDPS PREA Specialized Investigations: Sexual Abuse and Sexual Harassment and other required investigative training. Documentation and interview with the Facility Director (facility investigator) confirmed completing the required specialized investigator training as well as the annual PREA education. The Facility Director (facility investigator) indicated the specialized investigation training consisted of interviewing techniques, Miranda warnings, Garrity warnings, sexual abuse evidence collection, and the criteria and evidence to substantiate a case for administrative or prosecution referral.</p> <p>At the facility level, the assigned investigator will complete the initial inquiry into the alleged allegation of sexual abuse or sexual harassment, subsequently conduct an administrative investigation and when necessary refer the information to the Pitt County Sheriff’s Department (PCSD) for further investigation for the determination of criminal charges. Also, the Office of Special Investigations (OSI) and the Department of Social Services (DSS) conducts administrative investigations for residents under the age of 18. Residents 18 years of age are referred to the appropriate law enforcement agency to investigate allegations of sexual abuse and sexual harassment.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through investigator interview and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.3 (Investigations) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)

- Specialized Investigations: Sexual Abuse and Harassment power point & lesson plan
- Sexual Abuse (PREA) Investigators: Understanding Sexual Abuse power point
- DAC Mock Interview
- Training Course Record sign-in sheet
- Facility Director (facility investigator) interview

115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.7 (Specialized Medical/Mental Health Provider Training) requires PREA training and specialized training for medical and mental health staff who work at the facilities. Also, requires that all full and part-time medical and mental health staff who work regularly in NCDPS facilities receives specialized training in: How to detect and assess for signs of sexual abuse and sexual harassment; How to preserve physical evidence of sexual abuse; How to respond effectively and professionally to victims of sexual abuse and sexual harassment and How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>A review of the training documentation contained the signed “Medical & Mental Health Care PREA Training Acknowledgement” form acknowledging all five (5) medical and mental staff received the training and understand their responsibilities in the event of an incident. The facility’s medical staff does not conduct forensic examinations. Interviews with a medical and a mental health staff confirmed their understanding of the requirement to complete the specialized training offered by NCDPS (Preventing, Detecting, and Responding to Sexual Abuse of Youth in Confinement: The Role of the Mental Health Clinician), verified completing the on-line course and participating in the annual basic PREA training provided by the facility. Also, the medical and mental health staff interviews confirmed they had received the appropriate training in detecting/assessing for signs of sexual abuse and sexual harassment; preservation of physical evidence of sexual abuse; responding effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicious of sexual abuse or sexual harassment. None of the medical staff conduct forensic examination.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through medical and mental health staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Specialized Medical/Mental Health Provider Training) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • NCDPS (Preventing, Detecting, and Responding to Sexual Abuse of Youth in Confinement: The Role of the Mental Health Clinician) – power point • Medical & Mental Health Care PREA Training Acknowledgement forms • Medical and mental health staff interviews



115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.10 (General Provisions) requires prior to placement as part of the screening process each resident is screened upon admission with an objective screening instrument for risk of victimization and sexual abusiveness called NCDPS “Admission and Placement Screening” form within 72 hours and a mental health clinician will conduct an initial mental health clinical assessment. All residents are screened within twenty-four hours upon arrival at the facility to determine placement and their special needs. Those residents who score vulnerable to victim or sexually aggressive are included into their alert tracking system, as well as receiving further assessments, as identified. The intake and admission process consists of the NCDPS “Admission and Placement Screening” form, medical and mental health assessment and various other forms are used in combination with information about personal history, parent/guardian interviews, medical and mental health/substance abuse screenings, conversations, classification assessments as well as reviewed court records and case files.</p> <p>Also, policies require all residents to be assessed during intake screening and upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents. Requires intake screening include: mental, physical or developmental disabilities, age, physical build, prior incarcerations, criminal history (violent and non-violent), prior convictions for sex offenses against an adult or child, prior acts of sexual abuse, prior convictions for violent offenses, history of prior institutional violence or sexual abuse, prior sexual victimization, perception of vulnerability, and if the resident is or is perceived to be LGBTI or gender nonconforming. Residents are reassessed within thirty (30) days of their arrival and throughout their stay at the facility. The facility’s policies limit staff access to this information on a “need to know basis”. Also, prohibits the discipline of any resident for refusing to answer screening questions.</p> <p>Random resident interviews and the documentation revealed that risk screenings are being conducted on the same day as their admission and reassessed within thirty (30) days at the facility. Upon admission, each resident is screened with an objective screening instrument for risk of victimization and sexual abusiveness called NCDPS “Admission and Placement Screening” and within seventy-two (72) hours a mental health practitioner will conduct an initial Mental Health Assessment. Residents confirmed during the intake process being asked the questions on whether they had been sexually abused, identified with being gay, bisexual or transgender, whether they had any disabilities and/or whether they think they might be in danger of sexual abuse at the facility. Although there has been no transgender or intersex resident admitted to the facility within the past twelve (12) months, staff interviews confirmed consideration is given for the resident’s own view of their safety in placement and programming assignments.</p> <p>Interview with the Human Service Coordinator confirmed an initial screening is conducted</p>

within twenty-four (24) hours of the resident's arrival. Also, during the on-site visit, the auditor while interviewing asked the staff to explain the intake process. The Human Service Coordinator indicated reviewing prior information in the court reports, health issues, classification assessments and past criminal behavior. Also, the screening conducted includes any disabilities, age, physical build, current and previous juvenile programs, personal history, violent offenses, LGBTI status, mental illness, prior victimization and assaultive behaviors. Those residents who score vulnerable to victim or sexually aggressive are included into their alert system, as well as receiving further assessments, as identified. Residents reporting prior victimization, according to staff, are referred immediately for a follow-up with medical or mental health staff. These referrals to medical or mental health staff are documented. Residents are reassessed at a minimum of thirty (30) days and throughout their stay at the facility. The screening form NCDPS "Admission and Placement Screening" is utilized for the initial screening and for reassessing residents at the facility. Access to information is available only to the Facility Director, Human Service Coordinator and medical staff.

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews, and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.10 (General Provisions)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Resident files - NCDPS "Admission and Placement Screening"
- Human Service Coordinator interview
- Random resident interviews

115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.10 (General Provisions); NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 – Section 3.3 (Admissions) and NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 2 (R&P/YC 2: RJDC Admissions and Assessments) and NCDPS DACJJ and Delinquency Prevention Policy dated 4/15/07 – Section PS/YC 4.1 (Behavior Expectations) prohibits gay, bi-sexual, transgender and intersex residents being placed in a dorm area, bed or other assignments based solely on their identification or status. In addition, the policies describe the screening and assessment process and how that information, along with information derived from medical and mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine a resident’s appropriate placement, housing and bed assignments, as well as work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse.</p> <p>The assigned facility staff utilizes various forms, the Admission and Placement Screening, Mental Health Assessment Summary to name a few and any other pertinent information during the resident’s admission process to determine placement of residents in a specific sleeping assignment according to their risk level (low, medium or high). Documentation review confirmed the risk assessment occurred within seventy-two (72) hours and the residents received the rescreening as required. The facility does not have a designated housing unit for gay, bisexual, transgender or intersex resident. The facility did not have a resident who identified as transgender or intersex during the on-site visit, therefore this auditor was unable to ask a resident of concerns regarding their placement, a special unit just for LGBTI residents, their safety, and request to shower separately.</p> <p>Pitt RJDC’s Facility Director, Detention Center Supervisor/PCM and Human Service Coordinator interviews described how information from the NCDPS “Admission and Placement Screening” form precludes gay, bi-sexual, transgender and intersex residents being placed in a particular bedroom or other assignments based solely on their identification or status. In addition, they described the screening and assessment process and how that information, along with information derived from medical/mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine an resident’s appropriate placement, bed assignments, as well as education and program assignments with the goal of keeping all residents safe and free from sexual abuse.</p> <p>There are two (2) housing wings containing eighteen (18) single cells. Both housing wings had bulletin boards with some PREA information and other facility information. Isolation is not utilized at the facility as a means of protective custody. An interview with Pitt RJDC’s Facility Director confirmed isolation is not utilized at the facility as a means of protective custody.</p>

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.10 (General Provisions)
- NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document – Section 3.3 (Admissions)
- NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 2 (R&P/YC 2: RJDC Admissions and Assessments)
- NCDPS DACJJ and Delinquency Prevention Policy – Section PS/YC 4.1 (Behavior Expectations)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- NCDPS "Admission and Placement Screening"
- Facility Director interview
- Detention Center Supervisor/PCM interview
- Human Service Coordinator interview

115.351	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.1 (Reporting Sexual Abuse and Sexual Harassment) and NCDPS DACJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Availability for Reporting Mechanisms in a Facility) confirmed all the policies and procedures identified the multiple internal ways for residents to report sexual abuse and sexual harassment incidents, retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents. Also, the policies identified the resident’s accessibility to filing a grievance, communication (telephone, visitation and correspondence) with their attorney and/or parent/guardian, staff providing access to the Pitt County DSS without asking the resident the purpose of the call, the staff requirement of mandatory reporting and completing an incident report. The department has provided a method for staff to privately report sexual abuse and sexual harassment of residents.</p> <p>Pitt RJDC has multiple ways for resident reporting of sexual abuse and 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. Also, during the orientation process residents are advised they can tell any staff member, including interns, contractors or volunteers, who are trained and required to report all allegations of sexual abuse or sexual harassment and in writing through the grievance procedure.</p> <p>Detention Center Supervisor/PCM and random staff interviews confirmed they will accept allegations of sexual abuse or sexual harassment verbally, in writing, anonymously, from third parties, and their obligation of being mandated child abuse reporters. In addition, the staff is provided information for reporting sexual abuse or sexual harassment in a confidential manner through a separate phone number outside of the facility. While touring the entire facility, the auditor observed postings of the PREA information and victim advocate services information throughout the facility.</p> <p>Residents are informed verbally and in writing on how to report sexual abuse and sexual harassment. These various ways of reporting include advising an administrator, a staff member, telephoning the DSS hotline number, placing a written complaint in the grievance box and external complaint to a third party. Additionally, residents are provided with access to a locked grievance box with grievance forms, envelopes addressed to (DSS, PREA Office, Facility Director & Director of Facility Operations), posting of the PREA information (reporting resources) and brochure. While touring the entire facility, it was observed in the living areas postings of the PREA information (posters), other facility and victim advocate information, the locked grievance box with grievance forms, envelopes addressed to (DSS, PREA Office, Facility Director & Director of Facility Operations).</p> <p>The community victims’ advocacy services address and telephone number are available to the</p>

residents located throughout the facility. There is evidence of Pitt RJDC's Facility Director obtaining a Memorandum of Understanding with the Real Crisis Intervention, Inc. dated 2/09/20 to provide free confidential crisis intervention and emotional support services related to sexual abuse or assault residents at the facility. Any resident seeking services can call the toll-free telephone number. Also, the auditor contacted a representative from Real Crisis Intervention, Inc. via telephone during the on-site visit and confirmed the rape crisis center has established a telephone number for residents to call and to provide confidential emotional support services. She indicated there have been no calls from residents in the past twelve (12) months requesting emotional support services related to sexual abuse or assault. Also, the Real Crisis Intervention, Inc. representative indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. The Vident Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim.

Resident interviews indicated several ways to report sexual abuse and sexual harassment by sending correspondence to the Facility Director, Director of Facility Operations and DSS (third party), telephoning the DSS or PREA Office telephone number, speak with a staff they trust, and court counselor. During the intake and admission process residents are advised of their rights and sign a form acknowledging they had been advised of these rights. Some residents identified the grievance box as a means to report sexual abuse and sexual harassment and about the anonymous reporting capability.

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.1 (Reporting Sexual Abuse and Sexual Harassment)
- NCDPS DACJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Availability for Reporting Mechanisms in a Facility)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Memorandum of Understanding with the Real Crisis Intervention, Inc.
- Grievance form
- PREA Postings (English & Spanish)
- Real Crisis Intervention, Inc. representative's interview
- Detention Center Supervisor/PCM interview
- Random staff interviews
- Random resident interviews

115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.16 (Grievance Process) and NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 6 (R&P/YD 6: Non-Disciplinary, Internal Grievance Process) describes the orientation residents receive explaining how to use the grievance process to report allegations of abuse and has administrative procedures/appeal process for dealing with resident’s grievances regarding sexual abuse or sexual harassment. Residents may place a written grievance or complaint in the locked grievance box located in both housing wings of the facility.</p> <p>Prohibits the requirement a resident must first use an informal grievance process, or to otherwise attempt to resolve with staff, when reporting an allegation of sexual abuse. Allows a resident to submit a grievance without submitting to a staff member who is the subject of the complaint and prohibits the agency from referring the grievance to a staff member who is the subject of the complaint. Also, the policy describes the orientation residents receive explaining how to use the grievance process to report allegations of abuse and has administrative procedures/appeal process for dealing with resident’s grievances regarding sexual abuse or harassment. Residents are not required to utilize an informal process for reporting allegations of sexual abuse or sexual harassment nor are they required to submit it to the staff member involved in the allegation. The Facility Director will review the complaint immediately and advise the resident of the outcome or status of the investigation. The policies and procedures describe an unimpeded process and allow for other individuals to assist a resident in filing a grievance or to file grievances themselves on behalf of residents.</p> <p>Requires a final agency decision within ninety (90) days on any portion of a grievance that alleges sexual abuse, and that the ninety (90) days shall not include time consumed by residents preparing any administrative appeal. Allows the department to claim an extension of time to respond to a grievance up to seventy (70) days, with notification to the resident. Establishes an emergency grievance for a resident subject to a substantial risk of imminent sexual abuse, including an initial response within 24 hours and a final response within five (5) days. Prohibits the discipline of a resident for filing a grievance related to sexual abuse only where the agency demonstrates the resident filed the grievance in bad faith.</p> <p>Resident interviews and documentation confirmed there is a grievance process relating to sexual abuse or sexual harassment and a written complaint can be placed in the PREA/grievance box (black box). Also, they would contact a trusted staff, telephone the National Child Abuse Hotline or DPS PREA Office, parent/guardian, facility’s administration, DSS or court counselor in relation to sexual abuse or sexual harassment complaints. Staff interviews confirmed they will accept allegations of sexual abuse or sexual harassment verbally, in writing, anonymously, and identified the PREA/grievance box (black box) located in both housing wings. Also, the staff indicated they would contact their supervisor immediately to</p>

begin an investigation.

Interviews with the Detention Center Supervisor/PCM and the Facility Director's memorandum dated 1/18/20 confirmed there had been no grievances reported within past twelve (12) months related to sexual abuse or sexual harassment complaints. She indicated emergency grievances are available and residents can report to the staff who will respond within 24 hours. The final determination of the emergency grievance must be completed within five (5) days. Detention Center Supervisor/PCM confirmed the residents receive an explanation on how to use the grievance process to report allegations of sexual abuse and has administrative procedures/appeal process for dealing with resident's grievances regarding sexual abuse or sexual harassment during orientation and they are provided with a resident handbook. Residents may place a written complaint (grievance) in the secured grievance box located in both housing wings.

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.16 (Grievance Process)
- NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 6 (R&P/YD 6: Non-Disciplinary, Internal Grievance Process)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Pre-Audit Questionnaire review - In the past 12 months, the number of grievances filed that alleged sexual abuse reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of grievances alleging sexual abuse that reached a final decision within 90 days after being filed reported was zero
- The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of resident's decision to decline, reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions with five days reported was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed a grievance in bad faith reported was zero
- Grievance form
- Detention Center Supervisor/PCM interview
- Facility Director memorandum
- Random staff interviews

- Random resident interviews

115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.8 (Victim Support); NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 – Section 2.7 (Telephone and Mail) and Section 2.8 (Visitation) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 4.4 (Visitation) and Section 4 (R&P/YD 4: Legal Representation) requires the facilities to provide residents outside victim advocate for emotional support services, access to confidential legal counsel and the facility to provide reasonable communication between residents, these organizations and agency, in as confidential a manner as possible. The facility shall inform residents prior to giving them access, of the extent to which such communication will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. All the policies and procedures confirm residents are provided access to an outside victim advocate for emotional support services, access to confidential legal counsel and reasonable access to parent/guardian.</p> <p>There is evidence of Pitt RJDC’s Facility Director obtaining a Memorandum of Understanding with the Real Crisis Intervention, Inc. dated 2/09/20 to provide free confidential crisis intervention and emotional support services related to sexual abuse or assault residents at the facility. Any resident seeking services can call the toll-free telephone number. Also, the auditor contacted a representative from Real Crisis Intervention, Inc. via telephone during the on-site visit and confirmed the rape crisis center has established a telephone number for residents to call and to provide confidential emotional support services. She indicated there have been no calls from residents in the past twelve (12) months requesting emotional support services related to sexual abuse or assault. Also, the Real Crisis Intervention, Inc. representative indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. The Vident Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim.</p> <p>Random resident interviews confirmed they have reasonable and some confidential access to their attorneys and reasonable access to their parent/guardian either through visitation, correspondence or by telephone. The facility provides weekly calls to parents/legal guardians, provides for the toll-free hotline to report sexual abuse to Pitt County DSS or Real Crisis Intervention, Inc., permits parental/legal guardian visitation and letter writing to parents/legal guardians. The staff provides the NCDPS “Expect Respect” brochure, Real Crisis Intervention, Inc. information, envelopes addressed to (DSS, PREA Office, Facility Director & Director of Facility Operations) and the availability of the 24 hour toll free telephone numbers identified in</p>

the posters located in both housing wings.

The facility's postings and the orientation handbook contained information of the outside services. Resident interviews confirmed their knowledge of how to access outside services but limited knowledge of what kind of services are provided to them. The staff will be providing additional education to future residents on emotional support services during their orientation process and during their group session while at the facility. Also, all the bulletin boards located in both housing wings and the visitation area were updated with additional victim advocate services information.

After the on-site visit, all staff were re-trained on who provides free confidential emotional support services and to provide additional education to future residents on outside advocate services during their intake/orientation process. Postings of the outside advocate to access free emotional support information was updated both in English and Spanish and placed in the facility. The NCDPS PREA Program Coordinator sent the appropriate supplemental documentation to this auditor demonstrating corrective actions had been taken with this standard prior to the submission of this report.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews, review of documentation and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.8 (Victim Support)
- NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document – Section 2.7 (Telephone and Mail) and Section 2.8 (Visitation)
- NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 4.4 (Visitation) and Section 4 (R&P/YD 4: Legal Representation)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Memorandum of Understanding with the Real Crisis Intervention, Inc.
- PREA Postings (English & Spanish)
- Real Crisis Intervention, Inc. representative's interview
- Random staff interviews
- Random resident interviews
- Additional supplemental documentation for the corrective action (training)

115.354	Third-party reporting
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 1484 616">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.1 (Reporting Sexual Abuse and Sexual Harassment) identifies the agency's third party reporting process and instruct staff to accept third party reports from any source, provides information for anyone who sees or suspects sexual abuse, sexual harassment, or victimization of any kind to report it promptly.</p> <p data-bbox="252 660 1484 1041">NCDPS website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of a resident. There are several reporting options (written, verbal and anonymous) for the receipt of third-party reports of sexual abuse or sexual harassment. In addition, the Department has established a confidential webpage for employees to report allegations fraud, waste, abuse, misconduct or mismanagement in the department and these concerns may be reported anonymously. This information is reported directly to the NCDPS PREA Office who will inform the Pitt RJDC's Facility Director. The staff provides the parent/guardian with a packet containing varied forms, victim advocate services, the Facility Director's letter and third-party (DSS, NCDPS website) reporting information.</p> <p data-bbox="252 1086 1484 1344">Resident interviews confirmed their awareness of reporting sexual abuse or harassment to others outside of the facility including access to their parent(s)/legal guardian(s), court counselor and attorney. Additionally, they are instructed to report allegations of sexual abuse and sexual harassment to a trusted adult, parent/legal guardian, DSS, PREA Office, Facility Director & Director of Facility Operations, court counselor and/or attorney. All staff interviews were able to describe how reports may be made by third parties (DSS, NCDPS website).</p> <p data-bbox="252 1388 1484 1769">Random staff and the Facility Director (facility investigator) interviews were able to describe how reports are made by third parties (NCDPS website and Pitt County DSS) and confirmed if they receive allegations of sexual abuse or sexual harassment from third party reporters, the allegations would be reported directly to Pitt County DSS. Third party reporters included fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents. Also, a review of the Pitt RJDC Facility Director's memorandum identified the facility's methods for third party reporting.</p> <p data-bbox="252 1814 1484 2150">The auditor viewed the website, confirmed the information regarding third-party reporting and the link to send an e-mail directly to the NCDPS PREA Coordinator. Also, an interview with the NCDPS PREA Coordinator confirmed and described the process for third-party reporting sexual abuse or sexual harassment. Random resident interviews confirmed their awareness of reporting sexual abuse or sexual harassment to others outside of the facility including access to their parent(s)/legal guardian(s) and attorney. Additionally, the residents are instructed to report allegations of sexual abuse and sexual harassment to a trusted adult, parent/legal guardian, and/or attorney.</p>

Based on the review of the agency policy and procedures, observations and information obtained through staff and resident interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.1 (Reporting Sexual Abuse and Sexual Harassment)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- NCDPS website
- Facility Director's memorandum
- NCDPS PREA Coordinator interview
- Facility Director (facility investigator) interview
- Random staff interviews
- Random resident interviews

115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 - Section 2.1 (Reporting Sexual Abuse and Sexual Harassment) and NCDPS DACJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Availability for Reporting Mechanisms in a Facility) requires all employees, volunteers, interns, and contractors shall immediately report to their supervisor any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility, retaliation against residents or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Information related to a sexual abuse report shall not be released to anyone other than to the extent necessary, as specific in the procedures, to make treatment, investigation, and other security and management decisions. All facility staff are mandated reporters and receive information on clear steps on how to report sexual abuse and to maintain confidentiality through the facility’s protocol and/or training.</p> <p>NCDPS has identified the reporting process for all staff employed, contracted, intern or who volunteer to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and sexual harassment, retaliation against residents or staff who report any incidents or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Random staff interviews confirmed being mandated reporters and receiving information on clear steps on how to report sexual abuse, sexual harassment and to maintain confidentiality through the facility’s protocol and/or training. All staff would complete an incident report with the details of any incidents that would occur in the facility and they are prohibited from sharing information with anyone who is not part of the investigation or reporting process.</p> <p>Also, there is a PREA reference/education binder located in the supervisor’s office containing the policy, reporting process, victim advocate information, and forms for the facility staff in the event of an incident. Interviews with medical and mental health staff confirmed their responsibility to inform residents under 18 years old of their duty to report and limitations of confidentiality. Both the Facility Director and Detention Center Supervisor/PCM indicated all alleged sexual abuse or sexual harassment reports, regardless of where the information came from, is reported immediately to the facility investigator and Cabarrus County DSS.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p>

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document - Section 2.1 (Reporting Sexual Abuse and Sexual Harassment)
- NCDPS DACJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Availability for Reporting Mechanisms in a Facility)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Facility Director interview
- Detention Center Supervisor/PCM interview
- Random staff interviews
- Medical and mental health staff interviews

115.362	Agency protection duties
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 280">Auditor Discussion</p> <p data-bbox="252 327 1481 658">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 - Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism) and NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 6 (R&P/YD 6: Non-Disciplinary, Internal Grievance Process) requires that immediate action be taken upon learning that a resident is subject to a substantial risk of imminent sexual abuse.</p> <p data-bbox="252 712 1481 1214">Interview with the Detention Center Supervisor/PCM indicated any information received that alleges a resident is at substantial risk of imminent sexual abuse would require immediate removal of the resident and to isolate the threat. The other random staff interviews indicated if a resident was in danger of sexual abuse or at substantial risk of imminent sexual abuse, they would act immediately to ensure the safety of the resident, separate from the alleged perpetrator and contact their immediate supervisor. Also, the resident would be referred for mental health services. Pitt RJDC’s staff has a process in place when identifying a resident who may be subject to a substantial risk of imminent sexual abuse the information is documented and the resident is placed on a watch status. Facility Director’s memorandum dated 1/18/20 confirmed there were no incidents involving an immediate action to protect a resident that was a substantial risk of imminent sexual abuse in the past twelve (12) months at the facility.</p> <p data-bbox="252 1267 1455 1384">Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1438 1209 1469">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="300 1554 1471 2011" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document - Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism) • NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 6 (R&P/YD 6: Non-Disciplinary, Internal Grievance Process) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • Detention Center Supervisor/PCM interview • Facility Director’s memorandum • Random staff interviews

115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 - Section 1.11 (Allegation of Juvenile Sexual Abuse or Sexual Harassment at Former Center) requires the Facility Director, upon receiving an allegation that a resident was sexually abused while confined at another facility, to notify the head of the other facility within 72 hours where the alleged abuse occurred and to report it in accordance with NCDPS policies and procedures. Also, according to the policies and procedures, the Facility Director is to immediately report the incident Pitt County DSS and facility investigator for investigation and complete an incident report.</p> <p>An interview with Facility Director and her memorandum dated 1/18/20 indicated per policy an allegation made whereby a resident was sexually abused at another facility is required to be reported to the facility where the alleged sexual abuse occurred, the notification will be made no later than 72 hours and shall be documented. Also, the Facility Director indicated she had received no allegations a resident was abused while confined at another facility or were there any allegations received from another facility during the past twelve (12) months.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through a staff interview and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> ● North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document - Section 1.11 (Allegation of Juvenile Sexual Abuse or Sexual Harassment at Former Center) ● PREA Standards Compliance Checklist ● Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● Pre-Audit Questionnaire review - During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was zero ● Pre-Audit Questionnaire review - During the past 12 months, the number of allegations the facility received from other facilities was zero ● Facility Director interview and memorandum

115.364	Staff first responder duties
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 996">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 - Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism) and NCDPS Sexual Abuse Incident Response Checklist for First Responder requires all staff to take specific steps to respond to a report of sexual abuse including: to separate the resident, protect any physical evidence by requesting that the victim does not destroy evidence (through washing, brushing teeth, changing clothing, urinating, defecating, smoking, drinking or eating, protect any physical evidence by ensuring the alleged perpetrator does not destroy evidence (through washing, brushing teeth, changing clothing, urinating, defecating, smoking, drinking or eating), if the abuse took place within a time period that still allows for the collection of physical evidence and secure the crime scene. Requires that a victim shall be taken to medical staff as soon as possible or if no medical or mental health are on staff, shall ensure they are notified. Requires a first responder who is not a security staff shall request the victim not to destroy evidence and to notify a security staff.</p> <p data-bbox="252 1052 1484 1388">Random staff interviews and a first responder interview validated their technical knowledge of actions to be taken upon learning a resident was sexually abused and provided the action steps identified in the NCDPS policies and procedures of their responsibilities as first responders and aware of why they do these duties. Also, every interviewed staff, without hesitation, described actions they would take immediately, and these steps were all consistent with NCDPS policies and procedures including reporting to the Supervisor. A review of the training documentation confirmed staff had been trained in their responsibilities as first responders and have been provided with all types of additional training.</p> <p data-bbox="252 1444 1484 1601">Facility Director’s memorandum dated 1/18/20 indicated there have been no allegations a resident was sexually abused with a staff responding as a first responder or were notified within a time period that allowed for the collection of physical evidence during the past twelve (12) months.</p> <p data-bbox="252 1657 1484 1769">Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1825 1212 1859">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="295 1937 1460 2139" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document - Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism) • NCDPS Sexual Abuse Incident Response Checklist for First Responder

- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Pre-Audit Questionnaire review - During the past 12 months, the number of allegations the facility received that a resident was sexually abused was zero
- Pre-Audit Questionnaire review - During the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evident was zero
- Pre-Audit Questionnaire review - of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff was the first responder were zero
- Random staff interviews
- First responder interview
- Facility Director's memorandum

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 - Section 3 (Youth Development Center and Detention Center Sexual Abuse and Sexual Harassment Policy); NCDPS Sexual Abuse & Harassment Coordinated Response Overview provides a written coordinated response system at the facility to coordinate actions taken in response to an incident of sexual abuse and the notification procedures among staff first responders, administration, executive staff, medical and mental health practitioners, investigators, contacting law enforcement, and victim advocate services.</p> <p>Interviews with the Detention Center Supervisor/PCM and other random staff validated their technical knowledgeable of their duties to coordinate actions taken in response to a sexual abuse allegation. The facility's staff has a system in place providing the staff with clear actions to be taken by each discipline for accessing, contacting administrative staff, medical and mental health staff, contacting OSI, DSS and law enforcement, victim advocate services, hospital & parent/guardian and a number of other individuals in response to sexual abuse allegations. Also, the staff utilizes the "PREA Incident Report" form to complete the documentation of the incident. Interviews with the Facility Director and other staff validated their technical knowledgeable of their duties in response to a sexual abuse allegation.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> ● North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document - Section 3 (Youth Development Center and Detention Center Sexual Abuse and Sexual Harassment Policy) ● NCDPS Sexual Abuse & Harassment Coordinated Response Overview ● PREA Standards Compliance Checklist ● Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● PREA Incident Report form ● Detention Center Supervisor/PCM interview ● Random staff interviews

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency provided a memorandum dated October 2, 2019 confirms the North Carolina Department of Public Safety (NCDPS) does not engage in the collective bargaining process regarding any violation of departmental policy regarding PREA. NCDPS does not allow an entity to restrict the Department's ability to terminate an employee or remove a staff who has allegedly sexually abused and sexually harassed residents from having contact with other individuals pending the outcome of an investigation or determination of whether and to what extent to discipline is warranted. This was confirmed with one (1) of the PREA Program Coordinators that collective bargaining is not utilized in the Department.</p> <p>Based on the information discovered in the documentation and an interview with one of the PREA Program Coordinators, the auditor has determined the agency meets the requirements of the standard.</p> <p>Supporting Documents Reviewed:</p> <ul style="list-style-type: none"> ● PREA Standards Compliance Checklist ● NCDPS's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● PREA Program Coordinator Interview ● Collective Bargaining Memorandum dated 10/02/19

115.367	Agency protection against retaliation
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1485 786">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.8 (Victim Support) and Section 1.15 (Retaliation) requires the protection and monitoring of residents and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or sexual harassment investigation. NCDPS policies and procedures prohibit retaliation against any staff or resident for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. The monitoring at a minimum will take place for a period of 90 days or longer, as needed. The monitoring would include resident disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff.</p> <p data-bbox="252 842 1485 1429">An interview with the Facility Director confirmed her responsibility with monitoring the conduct or treatment of residents or staff who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to determine if changes that may suggest possible retaliation exist. She is responsible for assigning a PREA Support Person (PSP) that will serve as an advocate to link services (community based advocates or mental health professionals) and support to residents who report sexual abuse and sexual harassment by another resident, staff member, contractor or volunteer. The Facility Director has designated two (2) staff for this role and completed the required form (OPA-A18) on 7/05/17. These individuals are screened for appropriateness to serve as a victim advocate and receive specialized training. Random staff interviews and training documentation confirmed the PSP individuals and their role in the facility. The PSP individuals will be completing several forms depending on whether it is a staff or resident retaliation monitoring. Upon completion of the investigation, a PSP individual will complete a “PREA Sexual Abuse and Harassment Retaliation Report” form [Staff (OPA-I22) or Resident (OPA-I24)].</p> <p data-bbox="252 1485 1485 1731">Also, the Facility Director indicated the monitoring would include weekly face-to-face meetings, review of resident disciplinary reports, bed and program changes, negative performance reports as well as reassignments of staff. She indicated all alleged victims or reporters are met within twenty-four (24) hours, every two (2) weeks and after the first month every thirty (30) days thereafter. The Facility Director’s memorandum dated 1/18/20 indicated there were no incidents of retaliation at the facility in the past twelve (12) months.</p> <p data-bbox="252 1787 1398 1899">Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1955 1209 1989">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="300 2067 1461 2145" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document –

Section 1.8 (Victim Support) and Section 1.15 (Retaliation)

- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Facility Director interview and memorandum

115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.2 (Response) & Section PS/YC 3.0 (Behavior Expectations) and NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 – Section 2.3.13 (Temporary Confinement) contained information on post-allegation protective custody or guidelines for moving a resident to another facility as a last measure to keep residents who alleged sexual abuse safe and only until an alternative means for keeping the resident safe can be arranged. The facility restricts any isolation placement and does not provide protective housing for a resident as a last resort. The residents would be placed in another facility.</p> <p>Pitt RJDC Facility Director’s memorandum dated 1/18/20 advised the facility per policy and the use of an isolation room is prohibited to confine any residents. The facility restricts any isolation placement and does not provide protective housing for a resident as a last resort. The residents would be placed in another facility. Random staff interviews confirmed the facility does not use isolation for a victim of sexual abuse or sexual harassment the resident would be placed in another facility.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> ● North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.2 (Response) & Section PS/YC 3.0 (Behavior Expectations) ● NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document – Section 2.3.13 (Temporary Confinement) ● PREA Standards Compliance Checklist ● Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● Facility Director’s memorandum ● Random staff interview

115.371	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.3 (Investigations) and NCDPS Sexual Abuse & Sexual Harassment Coordinated Response Overview requires all staff to refer all alleged incidents of sexual abuse or harassment to local law enforcement [Pitt County Sheriff’s Department (PCSD)] for criminal investigations. The staff refers all allegations of sexual abuse and sexual harassment to the Department of Social Services (DSS), Office of Special Investigations (OSI), Regional Office and the NCDPS PREA Office for completion of an administrative investigation. Additionally, the facility’s PREA investigator could be assigned to conduct the administrative investigation. Requires each facility to cooperate with the assigned investigator and shall remain informed as to the progress of the investigation. The report shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.</p> <p>Also, the policies require investigations to be confidential and all interviews to be conducted in private; an investigation cannot terminate based on the department of the complaint’s alleged victim or perpetration from the agency employment or control, or if the source of the allegation recants; the credibility of an alleged victim, subject or witness must be assessed on an individual basis and never be determined by the person’s status as a resident or staff; investigation records to include, but not limited to investigations reports, transcripts of statement, copies of documentation relevant to the investigation, and all related material from other agency incidents as applicable; investigations must include an effort to determine whether staff actions or failures to act contributed to the incident being investigated and be documented in writing to include investigative facts and findings.</p> <p>Requires that all investigators shall receive special training in sexual abuse investigations before conducting PREA investigations, and that all investigations of allegations of sexual abuse or sexual harassment shall be done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Requires the gathering and preserving of direct and circumstantial evidence, including physical and DNA evidence and electronic monitoring data, interviews, and reviews of prior complaints and reports of sexual abuse involving the suspected perpetrator. Requires consultation with prosecutors before conducting compelled interviews and prohibits the use of a polygraph examination or other truth-telling device as a condition for proceeding with an investigation.</p> <p>Requires the credibility of any person shall be assessed on an individual basis. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Requires both administrative and criminal investigations shall be documented in written reports that shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessment, and the investigative facts and findings. Requires all allegations of criminal conduct be referred for prosecution. Requires an investigation not stop should the alleged abuser or victim depart from the employment or control of the facility or</p>

agency. Requires all case records associated with claims of sexual abuse or sexual harassment including all documentation be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years.

Documentation review and an interview with the facility investigator (Facility Director) confirmed she completed the required specialized investigator training as well as the annual PREA education. The investigator indicated all allegations are investigated, regardless of how the information is initially obtained and reported that investigations begin immediately upon notification. At the facility level, the assigned investigator will conduct an initial inquiry into the alleged allegation of sexual abuse or sexual harassment, to determine if criminal behavior is involved or a staff person is the alleged perpetrator, at which time the investigation would be referred to Pitt County Sheriff's Department (PCSD). The facility investigator collects evidence and maintains the evidence as required. The facility investigator's (Facility Director) interview confirmed the credibility of the victim is based on evidence found, and that no polygraph examination or truth-telling device is a condition for proceeding with an investigation. Also, the facility investigator (Facility Director) indicated an investigation does not cease until completed, regardless if the alleged perpetrator is released or resigns employment, or if the victim leaves the facility prior to the completion of the investigation. The facility investigator (Facility Director) reported she would assist if the investigation was conducted by Pitt County Sheriff's Department (PCSD).

There have been no reported investigations that appeared to be criminal and referred for prosecution of alleged staff's or resident's inappropriate sexual behavior that occurred in the facility in the past twelve (12) months. At the facility, there is one (1) staff who has completed the NCDPS PREA Specialized Training: Investigating Sexual Abuse and Sexual Harassment. It was evident, the staff reported incidents as required and reports are retained for five (5) years from the date the alleged abuser is released or employed by the facility, unless the abuse was committed by a juvenile and applicable laws require a shorter period of retention. The PREA data must be retained for ten (10) years.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.3 (Investigations)
- NCDPS Sexual Abuse & Sexual Harassment Coordinated Response Overview
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Specialized Investigations: Sexual Abuse and Harassment power point & lesson plan
- Sexual Abuse (PREA) Investigators: Understanding Sexual Abuse power point
- DAC Mock Interview
- Training Course Record sign-in sheet
- Facility investigator (Facility Director) interview

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.3 (Investigations) contains all the elements of the standard. The staff from the Department of Social Services (DSS) and the Office of Special Investigations (OSI) investigates the allegation and indicates a standard of a preponderance of the evidence for determining if allegations are substantiated.</p> <p>An interview with the Facility Director indicated they conduct fact finding investigations, make conclusions following the investigation and provide the information to the facility, to the Central Office and the NCDPS PREA Office for consultation with legal and human resources to determine disciplinary actions. Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> ● North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.3 (Investigations) ● PREA Standards Compliance Checklist ● Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● Facility Director interview

115.373	Reporting to residents
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1485 618">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 2.3 (Investigations) and Section 1.8 (Victim Support) requires that any resident who makes an allegation that he suffered sexual abuse is informed in writing contains the process for notifying residents whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation.</p> <p data-bbox="252 667 1477 1088">The NCDPS PREA Office has a process to notify the resident. The policies further requires that following a resident’s allegation that a staff member who has committed sexual abuse against the resident, the facility informs the resident unless the allegations are “unfounded” whenever the staff member is no longer posted within the resident’s housing area; the staff member is no longer employed at the facility; Pitt County Sheriff’s Department (PCSD) notifies that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility. With regard to investigations involving resident-on-resident allegations of sexual abuse, Pitt County Sheriff’s Department (PCSD) notifies the Facility Director who will then inform the resident whenever the facility learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="252 1137 1465 1473">Interviews with the Facility Director (facility investigator) and the Detention Center Supervisor/PCM confirmed all investigation outcomes, whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation, are completed by the facility investigator and the documentation is maintained with the investigation. Pitt RJDC Facility Director’s memorandum dated 1/18/20 confirmed there has been no reported investigation of alleged staff or resident’s inappropriate sexual behavior that occurred in the facility in the past twelve (12) months which was investigated and completed by an outside agency.</p> <p data-bbox="252 1523 1457 1646">Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1695 1211 1729">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="300 1809 1461 2145" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 2.3 (Investigations) and Section 1.8 (Victim Support) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • Pre-Audit Questionnaire review - The number of criminal and/or administrative investigations of alleged resident sexual abuse were completed by the agency/facility the past 12 months was zero

- Pre-Audit Questionnaire review - Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of residents who were notified, verbally or in writing, of the results of the investigation was zero
- Pre-Audit Questionnaire review - The number of investigations of alleged resident sexual abuse in the facility that were completed by an outside agency in the past 12 months was zero
- Pre-Audit Questionnaire review - Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of residents alleging sexual abuse in the Facility who were notified verbally or in writing of the results of the investigation was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of notifications to residents that were provided pursuant to this standard was zero
- Report of Investigative Outcome to Resident form
- Facility Director (facility investigator) interview
- Detention Center Supervisor/PCM interview
- Facility Director's memorandum

115.376	Disciplinary sanctions for staff
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1485 831">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.14 (Discipline) disciplinary sanctions up to and including termination for violating the facility’s sexual abuse or sexual harassment policies. The policy also mandates that the violation be reported to the NCDPS PREA Office and law enforcement if criminal in nature. All disciplinary sanctions are maintained in the employee’s HR file in accordance with NCDPS policy and procedures. Termination is the presumptive sanction for staff who have engaged in sexual abuse. Additionally, staff may not escape sanctions by resigning. Staff who resign because they would have been terminated are reported to the local law enforcement, unless the activities were not clearly criminal.</p> <p data-bbox="252 887 1474 1133">Interviews with the Facility Director and Administrative Specialist II confirmed there had been no employee disciplined, terminated or resigned in the past twelve (12) months for violation of the facility’s sexual abuse or sexual harassment policies. Pitt RJDC Facility Director’s memorandum dated 1/18/20 confirmed there had been no employee disciplined, terminated or resigned in the past twelve (12) months for violation of the facility’s sexual abuse or sexual harassment policies.</p> <p data-bbox="252 1189 1453 1301">Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1357 1209 1391">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="300 1469 1465 2141" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.14 (Discipline) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • Pre-Audit Questionnaire review - In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies was zero • Pre-Audit Questionnaire review - In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies is zero • Pre-Audit Questionnaire review - In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies reported were zero • Pre-Audit Questionnaire review - In the past 12 months, the number of staff from the facility who have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or

sexual harassment polices reported was zero

- Facility Director interview and memorandum
- Administrative Specialist II interview

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.14 (Discipline) requires that volunteers and contractors in violation of the facility’s policies and procedures regarding sexual abuse and sexual harassment of residents will be reported to DSS, OSI, DPS PREA Office and local law enforcement unless the activity was clearly not criminal and to relevant licensing bodies. Additionally, the policies require the facility/RJDC staff to take remedial measures and prohibit future contact with residents in the case of any violation of the facility’s sexual abuse and sexual harassment policies by contractors or volunteers.</p> <p>The Pitt RJDC Facility Director’s interview and her memorandum dated 1/18/20 confirmed there were no instances or reports whereby a volunteer or contractor was alleged to have violated the sexual abuse or sexual harassment NCDPS policies and procedures in the past twelve (12) months. All volunteers and contractors must sign the “PREA Acknowledgement Form” upon completion of the PREA training they received. This was verified with the documentation review.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> ● North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.14 (Discipline) ● PREA Standards Compliance Checklist ● Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) ● Pre-Audit Questionnaire review - In the past 12 months, the number of volunteers who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of resident was zero ● Pre-Audit Questionnaire review - In the past 12 months, the number of contractors who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of a resident was zero ● “PREA Acknowledgement Form” forms ● Facility Director interview and memorandum

115.378	Interventions and disciplinary sanctions for residents
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 952">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.14 (Discipline); NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R & P) Document – Section 2 (R&P/YC 2: RJDC Admission and Assessments) and NCDPS DJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section PS/YC 3.0 (Behavior Expectations) requires a resident who makes a report of resident-on-resident sexual violence or employee sexual misconduct or sexual harassment that is determined to be false, may be charged with sanctions pursuant to the behavior management program if it is determined the report was made in bad faith following consultation with the NCDPS PREA Coordinator. Residents shall not be charged for reports of sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred. Such a report shall not constitute falsely reporting an incident or lying, even if an investigation does not establish sufficient evidence to substantiate the allegation.</p> <p data-bbox="252 1008 1484 1344">Requires sanctions to be 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. Requires consideration whether a resident’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Requires the consideration whether to require the offending resident to participate in interventions as a condition of access to programming or other benefits when services, such as therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for abuse, are available.</p> <p data-bbox="252 1400 1484 1769">Pitt RJDC Facility Director’s interview indicated staff provides each resident with an orientation handbook that includes their rights and responsibilities, a disciplinary list of violations, disciplinary procedures and transfers. Residents will be offered therapy, counseling or other interventions designed to address and correct the underlining reasons for their conduct. Pitt RJDC Facility Director’s written memorandum dated 1/18/20 states there have been no administrative findings of guilt for resident-on-resident sexual abuse occurred at the facility in the past twelve (12) months resulting in disciplinary action. Also, the Facility Director’s interview indicated residents may also be referred for prosecution if the allegations were criminal.</p> <p data-bbox="252 1825 1396 1937">Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1993 1212 2027">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="295 2105 1460 2139" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual

Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.14 (Discipline)

- NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R & P) Document – Section 2 (R&P/YC 2: RJDC Admission and Assessments)
- NCDPS DJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section PS/YC 3.0 (Behavior Expectations)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Pre-Audit Questionnaire review - In the past 12 months, the number of administrative findings of Resident-on-Resident sexual abuse that have occurred at the facility was zero
- Pre-Audit Questionnaire review - In the past 12 months, the number of criminal findings of guilt for Resident-on-Resident sexual abuse that have occurred at the facility was zero
- Facility Director interview and memorandum

115.381	Medical and mental health screenings; history of sexual abuse
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 952">A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.10 (General Provisions) and NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 1.4 (Mental Health Services) require medical and mental health/substance abuse evaluations and as appropriate, treatment is offered to all residents victimized by sexual abuse and ensure confidentiality of information. Medical and mental health staff is required to notify residents at the initiation of services their duty to report, limitations of confidentiality, and must obtain informed consent from youth who are 18 years old or older before reporting information about the resident’s prior sexual victimization that did not occur in an institutional setting. Residents who report prior sexual victimization or disclose prior incidents of perpetrating sexual abuse, either in an institution or in the community, are required to be offered a follow-up with a medical or mental health practitioner within 14 days of admission/screening.</p> <p data-bbox="252 1008 1468 1422">Documentation review confirmed Pitt RJDC’s medical and mental health staff completes various admission screening forms (i.e. Healthcare Services Medical Screening Interview, MAYSI, Suicide Risk Screening, Healthcare Services Mental Health Consultation, and Healthcare Services Admission History and Physical Examination) during the initial intake process including informed consent disclosures. There were no residents who disclosed prior victimization during their initial screening process in the past twelve (12) months. Medical and mental health staff interviews confirmed that although there were no disclosures, all residents were offered follow-up meetings with medical and mental health providers. Medical staff provides residents with health education (including sexual abuse/assault) during the initial intake process and throughout their stay at the facility.</p> <p data-bbox="252 1478 1396 1601">Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p data-bbox="252 1657 1212 1691">Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul data-bbox="295 1769 1476 2139" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.10 (General Provisions) • NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 1.4 (Mental Health Services) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • Admission screening forms (i.e. Healthcare Services Medical Screening Interview, Male Intake Health Assessment, MAYSI, Suicide Risk Screening, Healthcare Services Mental

Health Consultation, Mental Health Assessment Summary, Treatment Services Information Sheet and Healthcare Services Admission History and Physical Examination)

- Medical and mental health staff interviews

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.10 (General Provisions); Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism); NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 1.4 (Mental Health Services) and NC General Statute Chapter 15B (Victims Compensation Article 1 Crime Victim’s Compensation Act) requires the timely and unimpeded access to emergency medical treatment and crisis intervention services for victims of sexual abuse. If there are no qualified medical or mental health practitioners on duty at the time a report of sexual assault or sexual abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the facility’s designated medical and mental health practitioner. Requires that victims of sexual abuse while incarcerated shall be offered timely information about and access to emergency contraception and sexually transmitted infections prophylaxis. Requires that treatment services are provided free of cost and regardless of whether the victim identifies the abuser or cooperates with an investigation.</p> <p>Documentation and interviews confirmed Vident Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim. Real Crisis Center, Inc. is the program identified to provide confidential emotional support services to the residents at the facility. The facility has available the NCDPS “Expect Respect” brochure that identifies for the residents to telephone the hotline number and postings of the PREA information (reporting resources). Also the facility has two (2) PREA Support Persons (PSP) that serve as an advocate to link services (community based advocates or mental health professionals) and provide confidential emotional support to residents who report sexual abuse and sexual harassment by another resident, staff member, contractor or volunteer.</p> <p>Interviews with the medical and mental health staff confirmed that residents (victims) of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. The medical staff indicated that services begin immediately upon notification of a victim of sexual abuse from the supervisor or any other staff to contact the hospital and medical practitioner. All notifications would be completed to the appropriate individuals and to follow the medical staff’s directive regarding any forensic examination. The medical and mental health staff interviews indicated the scope of services is in accordance to their professional judgment, policy and any physician orders or protocols. All orders will be documented in the resident’s medical/mental health record.</p> <p>Also, the medical staff’s interviews indicated that a referral could be made to the hospital to begin any sexually transmitted infection prophylaxis treatment/services and orders for follow-up services. Mental health services would begin when the victim is available once the forensic examination has been completed at the hospital. Mental health staff interviews indicated they would see the victim no later than 24 hours after an incident, provide one-on-one counseling</p>

and make available outside emotional support services and follow-up care. Pitt RJDC had no allegation where a victim required a forensic medical examination in the past twelve (12) months.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.10 (General Provisions); Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism)
- NCDPS DACJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 1.4 (Mental Health Services)
- NC General Statute Chapter 15B (Victims Compensation Article 1 Crime Victim's Compensation Act)
- PREA Standards Compliance Checklist
- Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
- Memorandum of Understanding with Real Crisis Center, Inc.
- PREA brochure "Expect Respect: Your Safety in Juvenile Justice" and JJ Rack Card
- Real Crisis Center, Inc. representative interview
- Medical and mental health staff interviews

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 3.2 (Medical Evaluation and Forensic Mental Health Evaluation Following Allegations of Sexual Abuse, Sexual Harassment and/or Voyeurism) and Section 3.3 (Support of the Resident Post-Evaluation for Sexual Abuse, Sexual Harassment and/or Voyeurism) requires ongoing medical and mental health care for sexual abuse victims and abusers. Additionally, the policies require the facilities to offer medical and mental health evaluations, transportation to a medical emergency room or a facility in the community that is equipped to evaluate, collect physical evidence and appropriate follow-up treatment that may include screening, including follow-up care for sexually transmitted diseases and other communicable diseases and any other counseling or assistance as requested. Requires treatment services to be free of financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility is required to provide such victims with medical and mental health services consistent with the community level of care.</p> <p>Victims of sexual abuse will be transported to Vident Medical Center to receive treatment and the physical evidence can be gathered by a certified SANE medical examiner. There is a process in place to ensure medical and mental health staff track on-going medical and mental health services for victims who may have been sexually abused. The medical and mental health staff have a protocol (Medical/Mental Health Discharge Summary & Mental Health Request Referral form) in place to assist residents and their families upon discharge from the facility to continue services if needed. Documentation review confirmed there have been no investigations of alleged resident’s sexual abuse that occurred in the facility in the past twelve (12) months.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 3.2 (Medical Evaluation and Forensic Mental Health Evaluation Following Allegations of Sexual Abuse, Sexual Harassment and/or Voyeurism) and Section 3.3 (Support of the Resident Post-Evaluation for Sexual Abuse, Sexual Harassment and/or Voyeurism) • PREA Standards Compliance Checklist • Pitt RJDC’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • Medical/Mental Health Discharge Summary and Mental Health Request Referral form

- Medical and mental health staff interviews

115.386	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>A review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Deputy Secretary of Juvenile Justice in September 2013 – Section 1.9 [PREA Compliance Manager (PCM)] and Section 2.3 (Investigations) and NCDPS Sexual Abuse & Harassment Coordinated Response Overview requires incident reviews (PREA Post Incident Review) to be conducted at the conclusion of every sexual abuse investigation including where the allegation has been substantiated and unsubstantiated. Requires the sexual abuse incident review to be conducted within thirty (30) days of the conclusion of the investigation. Requires the review team to include upper-management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Requires the review of the allegation for: the need for policy or practice change, motivation for the incident, check of the physical area for barriers, staffing levels at the time of the incident, and information regarding any enhancement of current monitoring technology. Requires a written report completed that includes any recommendations and corrective action, as well as documentation showing implementation of the recommendations or the reason for not implementing the recommendations.</p> <p>An interview with Pitt RJDC’s Facility Director, staff interviews and documentation review confirmed the staff document the information on the “PREA Post Incident Review” form which captures all aspects of an incident to include: brief chronological summary, acknowledgment of what went well during the incident, whether the incident response/action was in compliance with relevant NCDPS rules, policies, and procedures, corrective actions taken or still needed to improve outcomes in future similar incidents, policy changes, motivation of the incident, physical barriers, monitoring technology, medical and mental health services provided, outcome of the investigation/corrective actions, and resident notification of investigation outcome.</p> <p>Pitt RJDC’s Sexual Abuse Incident Review Team consists of the Facility Director, Detention Center Supervisor/PREA Compliance Manager, medical and mental health representatives and assigned PSP staff. Pitt RJDC Facility Director’s interview and memorandum dated 1/18/20 reported there has been no investigations of alleged staff’s or resident’s sexual abuse that occurred in this facility in the past twelve (12) months.</p> <p>Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard</p> <p>Policy and Supporting Documents Reviewed, Interviews and Observation:</p> <ul style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.9 [PREA Compliance Manager (PCM)] and Section 2.3 (Investigations)

	<ul style="list-style-type: none"> • NCDPS Sexual Abuse & Harassment Coordinated Response Overview • PREA Standards Compliance Checklist • Pitt RJDC's PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • PREA Post Incident Review form • Pitt RJDC Facility Director's interview and memorandum • Random staff interviews
--	--

115.387	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.388	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1461 958">The auditor reviewed the North Carolina Department of Public Safety (NCDPS) web page at https://www.ncdps.gov/Adult-Corrections/Prison-Rape-Elimination-Act containing the PREA audit reports for both the first and second PREA review cycle. The first PREA audit review cycle had forty-three (43) PREA audit reports completed from August 2013 – August 2016. The second PREA audit review cycle had seventy-seven (77) PREA audit reports completed from August 2016 through August 2019. A review of both PREA audit review cycles indicated each facility was audited at least once during each three-year period. The auditor was provided with all relevant documents pertaining to this standard. Currently, NCDPS has sixty-nine (69) facilities (55 prisons, 10 juvenile and 4 adult community confinement) to begin the third PREA audit review cycle. The facility is one of the facilities scheduled for the first year of the third PREA review cycle. The auditor had access to the entire facility and was able to conduct staff and resident interviews in a private room and provided with documentation in accordance to the standard. Residents were permitted to send confidential information or correspondence to the auditor, the same method as sending to their legal counsel. Posters (pre-audit notices) for communicating to the auditor were in all areas of the facility.</p> <p data-bbox="252 1010 1442 1088">Based on the review of the agency policy and procedures and information obtained through the documentation review, the agency has demonstrated compliance with this standard.</p> <p data-bbox="252 1140 836 1173">Policy and Supporting Documents Reviewed:</p> <ul data-bbox="300 1252 1458 1588" style="list-style-type: none"> • North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document – Section 1.10 (General Provisions) • PREA Standards Compliance Checklist • NCDPS’s PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) • NCDPS 2017-2018 Sexual Abuse Annual Report • NCDPS 2015-2016 Sexual Abuse Annual Report • NCDPS website

115.403	Audit contents and findings
	<p data-bbox="252 1818 1005 1852">Auditor Overall Determination: Audited at Agency Level</p> <p data-bbox="252 1897 523 1930">Auditor Discussion</p>

Appendix: Provision Findings

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

115.311 (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	yes

	that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	
	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	yes

	placement of supervisory staff?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

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

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

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

115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? (N/A for non-secure facilities)	yes

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

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

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

115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes

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

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

115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all 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 is not responsible for investigating allegations of sexual abuse.)	yes

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

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

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

115.322 (c)	Policies to ensure referrals of allegations for investigations	
	<p>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))</p>	yes

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

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

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

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

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

115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes

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

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

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

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

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

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

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

115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

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

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

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

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

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

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

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

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

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

115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes

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

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

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

115.342 (d) Placement of residents		
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes

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

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

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

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

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

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

115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes

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

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

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

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

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.)	na

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

115.401 (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