

PREA Facility Audit Report: Final

Name of Facility: Region 1 Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 09/06/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Robert Palmquist	Date of Signature: 09/06/2022

AUDITOR INFORMATION	
Auditor name:	Palmquist, Robert
Email:	robobem@gmail.com
Start Date of On-Site Audit:	08/29/2022
End Date of On-Site Audit:	08/31/2022

FACILITY INFORMATION	
Facility name:	Region 1 Juvenile Detention Center
Facility physical address:	E. 210 Dalton Avenue, Coeur d'Alene, Idaho - 83815
Facility mailing address:	

Primary Contact	
Name:	Eric Sheffield
Email Address:	esheffield@kcgov.us
Telephone Number:	208-446-1909

Superintendent/Director/Administrator	
Name:	Linda Hoss, Director
Email Address:	lhoss@kcgov.us
Telephone Number:	208-446-1904

Facility PREA Compliance Manager	
Name:	Eric Sheffield
Email Address:	esheffield@kcgov.us
Telephone Number:	208-446-1909

Facility Characteristics	
Designed facility capacity:	53
Current population of facility:	10
Average daily population for the past 12 months:	16
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	17 and under
Facility security levels/resident custody levels:	General population or Safety oriented observation
Number of staff currently employed at the facility who may have contact with residents:	30
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	1
Number of volunteers who have contact with residents, currently authorized to enter the facility:	20

AGENCY INFORMATION	
Name of agency:	Kootenai County Administration
Governing authority or parent agency (if applicable):	
Physical Address:	451 North Government Way, Coeur d'Alene, Idaho - 83814
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information**Name:** Eric Sheffield**Email Address:** esheffield@kcgov.us**SUMMARY OF AUDIT FINDINGS**

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

- 115.331 - Employee training
- 115.332 - Volunteer and contractor training

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-08-29
2. End date of the onsite portion of the audit:	2022-08-31

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Victim Advocate Interview, September 1, 2022, Safe Passage. This organization provides 24 advocacy support, accompaniment during law enforcement interviews and through the legal process, coordination with law enforcement, prosecutor's office, necessary referrals to community resources, 24-hour hospital advocacy to survivors of sexual assault/abuse, free counseling with a licensed counselor and emergency shelter.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	53
15. Average daily population for the past 12 months:	16
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	11
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0

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

Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	9
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None
If "Other," describe:	The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. The initial roster provided to the Auditor at 8:00 am listed 11 residents. During the Tour of the facility, two of the residents were released from custody. As a result the Auditor interviewed nine residents.
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. The initial roster provided to the Auditor at 8:00 am listed 11 residents. During the Tour of the facility, two of the residents were released from custody. As a result the Auditor interviewed nine residents.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	1
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No resident interviewed had a physical disability.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No resident interviewed presented with a cognitive or functional disability.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility has only conducted one investigation in the past three years. The Auditor requested the opportunity to review the one investigation based on an incident that occurred in 2018. The Auditor was permitted to review the investigation. The incident was an allegation of Staff-on-Resident sexual abuse. The investigation conducted by Law Enforcement was unfounded.</p>

<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No resident was deaf or hard of hearing.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No residents were Limited English Proficient.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No resident identified as lesbian, gay or bisexual.</p>

<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No residents interviewed reported sexual abuse in the facility.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No resident interviewed had disclosed sexual victimization during risk screening.</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. No resident interviewed had been placed in segregated housing/isolation for risk of sexual victimization.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The Auditor interviewed 100% of the residents who were in the facility on the first day of the Audit. The initial roster provided to the Auditor at 8:00 am, listed 11 residents. During the Tour of the facility, two of the residents were released from custody. As a result, the Auditor interviewed nine residents.</p>

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The facility has two shifts, 12 hours each. Each shift has at least one supervisor. All staff members rotate through each post during the shift.</p>

Specialized Staff, Volunteers, and Contractor Interviews

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

<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>13</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>

<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>
<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input type="checkbox"/> Other</p>

81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>The Auditor was permitted access to and observed all the District 1 Juvenile Detention Center areas. The Auditor was permitted to request and receive copies of all relevant documents. The Auditor interviewed Staff, supervisors, and administrators. The Auditor was permitted to conduct private interviews with residents. Residents were allowed to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p>

Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>The Auditor was permitted to request and receive copies of all relevant documents.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	1
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
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101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	No incidents of sexual harassment have occurred at the facility in the past 12 months.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The facility has only conducted one investigation in the past three years. The Auditor requested the opportunity to review the one investigation based on an incident that occurred in 2018. The Auditor was permitted to review the investigation. The incident was an allegation of Staff-on-Resident sexual abuse. The investigation conducted by Law Enforcement was unfounded.</p>
<p>SUPPORT STAFF INFORMATION</p>	
<p>DOJ-certified PREA Auditors Support Staff</p>	
<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>Non-certified Support Staff</p>	

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

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

- Exceeds Standard
(Substantially exceeds requirement of standard)

- Meets Standard
(substantial compliance; complies in all material ways with the stand for the relevant review period)

- Does Not Meet Standard
(requires corrective actions)

Auditor Discussion Instructions

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

115.311	<p>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 1.02 Reporting Child Abuse/Neglect • Policy 1.01 Organizational Chart • Interviews conducted with: <ul style="list-style-type: none"> • PREA Coordinator • Detention Manager/Agency Head <p>District 1 Juvenile Detention Center has a zero-tolerance policy and training program that meets the requirements for this standard. Policy 8.03 Prison Rape Elimination Act provides the Agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. It has definitions of prohibited behaviors and sanctions for those prohibited behaviors. The policy provides strategies and responses to reduce and prevent sexual abuse. The policy also includes procedural guidelines, such as screening residents upon intake, training (for both Staff and residents), reporting procedures (both Staff and residents), intervention procedures and investigative guidelines.</p> <p>The Agency has a PREA Coordinator. The PREA Coordinator indicated he had sufficient time to manage and oversee the implementation of PREA standards. The Agency has only one facility; the Auditor notes that several Supervisors assist in the PREA implementation and provide input to the Coordinator to ensure compliance.</p> <p>The Auditor reviewed Policy 8.03 Prison Rape Elimination Act, the District Juvenile Detention Center Organization Chart (Policy 1.01) and Policy 1.02 Reporting Child Abuse/Neglect. In addition, interviews were conducted with the PREA Coordinator and the Detention Manager/Agency Head. The Agency Head supported the efforts of the PREA Coordinator, and the PREA Coordinator indicated he had sufficient time to coordinate the facility's PREA compliance efforts. District 1 Juvenile Detention Center has a zero-tolerance policy and training program that meets the requirements for this standard. The policy provides the Agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. It has definitions of prohibited behaviors and sanctions for those prohibited behaviors. The policy provides strategies and responses to reduce and prevent sexual abuse. The Agency has a PREA Coordinator and only one facility.</p> <p>Policy 8.03 Prison Rape Elimination Act addresses 115.311 (a)</p> <p>District 1 Juvenile Detention Center has a PREA Coordinator; the Coordinator's position is upper-level management and is notated in the organization chart. The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. 115.311 (b)</p> <p>The District 1 Juvenile Detention Center does not have a PREA Compliance Manager as the Agency operates only one facility. 115.311 (c)</p> <p>The District 1 Juvenile Detention Center complies with 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator.</p>
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115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This standard is not applicable. District 1 Juvenile Detention Center is a County Juvenile Detention Facility. District 1 Juvenile Detention Center does not contract with other agencies for confinement services.

115.313	Supervision and monitoring
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Documents:</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 2.02 Staffing • Policy 7.11 Cameras • Staffing Plan Assessment January 31, 2022 • Staffing Plan Assessment 2021 • Staffing Plan Assessment 2020 • Unannounced Log entries • Interviews conducted with: <ul style="list-style-type: none"> • PREA Coordinator • Detention Manager • Staff who conduct Unannounced Rounds <p>The Auditor reviewed Policy 8.03 Prison Rape Elimination Act, Policy 2.02 Staffing, Policy 7.11 Cameras and the Staffing Plan Assessment dated January 31, 2022, March 1, 2021, and April 8, 2020. The District 1 Juvenile Detention Center implements a staffing plan that provides adequate staffing levels. In addition to staff members, there is video monitoring available to protect residents from sexual abuse.</p> <p>The Agency Head and PREA Coordinator review the staffing plan annually. The staffing plan is consistently complied with; there have been no deviations from the staffing plan in the past 12 months.</p> <p>The Auditor reviewed the staffing plan. The Staffing plan review includes a review of any judicial findings (no) or inadequacies from federal investigative or internal/external oversight agencies (no). The plan reviews the facility's architectural weaknesses. The review includes a review of the population statistics for the previous year and a review of the population for the day on which the review took place. The plan reviews the unannounced log to determine if appropriate documentation is completed for the unannounced rounds.</p> <p>The Auditor reviewed the log containing information documenting unannounced rounds. The log contained daily entries from the day and night shifts. All shifts indicated a supervisor had conducted rounds to detect and deter sexual abuse or sexual harassment incidents. The Auditor interviewed two shift supervisors who indicated they had personally conducted unannounced rounds; the rounds were conducted at random times, and the Staff was generally unaware they were conducting rounds to detect and deter sexual abuse/harassment. The District 1 Juvenile Detention Center maintains a practice of having intermediate-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The procedures for conducting these unannounced rounds are well established in the facility. The Staffing plan review considers the overall policies and practices and if there is an adequate number of Supervisory personnel.</p> <p>The District 1 Juvenile Detention Center operating procedures require supervisors to maintain a minimum staff-to-resident ratio of 1 staff to 8 residents during hours the residents are awake (7:00 am – 10:00 pm) and 1 staff to 16 residents during the hours the residents are asleep (10:00 pm – 7:00 am). There must be a supervisor in the facility at all times, all designated fixed posts must be staffed and if necessary mandatory overtime will be utilized.</p> <p>The District 1 Juvenile Detention Center staff plan specifies that at all times, a staff member of the same sex as the residents shall be on duty. This staff member shall be directly responsible for supervision that involves physical contact (pat searches) or activities commonly afforded reasonable protection against opposite-sex observation or supervision (use of toilet/shower facilities). Personal observation of residents may be by opposite-sex Staff as long as opposite-sex privacy concerns are given appropriate protection. There is continual sight and sound surveillance of all residents. Personal staff observations of residents are conducted at a minimum of every 15 minutes. Staff members are directed to be alert to resident depression, family rejection, loneliness, and resistance to Staff or programs, and when such symptoms are discovered, appropriate intervention is required, including referrals to Mental Health or Medical Staff. These referrals are documented.</p> <p>The Auditor observed appropriate staffing levels throughout the facility; video monitoring is available to protect residents from sexual abuse. The staffing plan is reviewed every year by both the PREA Coordinator and the Detention Manager. The staffing plan is consistently complied with, and there have been no deviations from the staffing plan in the past 12 months. The staff plan review considers physical plant inadequacies, video monitoring systems, the population levels and the</p>	

behavior of residents, supervisor availability, and any incidents of sexual abuse or sexual harassment that may have occurred during the year. Interviews with the Agency Head/Director and the PREA Coordinator indicate that both individuals review the staffing plan.

Staffing Plan Assessment January 31, 2022, addresses 115.313(a) (b) (c) and (d).

Unannounced Round Logs addresses 115.313 (e).

The District 1 Juvenile Detention Center substantially complies with 115.313 Supervision and monitoring.

115.315	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> ● Policy 7.01 Counts ● Policy 7.03 Searches of Juveniles and Visitors ● Policy 8.03 Prison Rape Elimination Act ● Training Agendas 4-30-2021 and 5-5-2021 ● Powerpoint Presentation: PREA Review and Searches ● Lesson Plan PREA Training <p>Interviews:</p> <ul style="list-style-type: none"> ● Random Staff ● Random residents <p>The District 1 Juvenile Detention Center does not conduct cross-gender strip searches. In the past three years, there has been no circumstance where a cross-gender search has taken place. No residents are restricted from participation in any programs. Same-sex individuals conduct all pat searches. Specifically, Policy 7.0, Searches of Juveniles and Visitors, provides guidance on this subject. The search of juveniles by detention personnel, as noted in the policy, requires expertise and a humane attitude on the part of the Staff. A juvenile should be informed, quietly and simply, of what is about to take place. The juvenile should not be touched more than necessary to conduct a comprehensive search. All Staff interviewed on this subject indicated they were aware of the search policy and had not deviated from the policy. The staff members interviewed were sensitive to the residents' potential vulnerability during the search process. All residents interviewed on this subject indicated they are pat searched by same-sex Staff.</p> <p>The facility policy prohibits Staff from searching or physically examining a transgender or intersex resident to determine the resident's genital status. During the interviews, Staff indicated they had been provided training on conducting a pat search on transgender or intersex residents. Specifically, the Moss Group Video "Guidance on Cross Gender and Transgender Pat searches". Staff members were aware of the need to discuss the search procedure and ask the resident if they preferred a male or a female staff member to conduct the pat search.</p> <p>The District 1 Juvenile Detention Center has taken extensive care to ensure all residents shower, perform bodily functions and change clothing outside the Staff's view.</p> <p>The Auditor observed staff members announce their presence when entering a housing unit.</p> <p>The District 1 Juvenile Detention Center maintains procedures and practices that allow residents to shower, perform bodily functions, and change clothes without being viewed by a staff of the opposite gender. Opposite gender staff announces their presence when entering a resident housing unit. The Auditor questioned line staff during the tour about their announcements in the unit. All Staff questioned during the tour indicated they made announcements every time they entered a unit.</p> <p>The Auditor reviewed training curricula and formally and informally interviewed Staff and Residents on the issues of strip searches, pat searches and searches of transgender and intersex residents and opposite gender unit announcements. All staff members (100%) have participated in training on searches of transgender and intersex residents professionally and respectfully. All residents interviewed on this subject indicated they are pat searched by same-sex Staff. Interviews with residents indicate no issues concerning privacy. Residents indicated Staff members are professional and respectful of residents' privacy. All Staff interviewed on this subject indicated they are aware of the search policy and have not deviated from the policy. The Auditor is satisfied there is substantial compliance with this standard.</p> <p>Policy 7.03 Searches of Juveniles and Visitors address 115.315 (a), (b) and (c).</p> <p>Policy 8.03 Prison Rape Elimination Act addresses 115.615(d).</p> <p>Policy 8.03 Prison Rape Elimination Act and interviews with random Staff and residents address 115.615(e).</p> <p>Training Agendas, Powerpoint Presentation and the Lesson Plan PREA Training address 115.315(f)</p> <p>The District 1 Juvenile Detention Center substantially complies with 115.315: Limits to cross-gender viewing and searches.</p>

115.316	Residents with disabilities and residents who are limited English proficient
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Documents:</p> <ul style="list-style-type: none"> ● Policy 8.03 Prison Rape Elimination Act ● Certified Court Interpreters ● Use of Spokane International Translation Memorandum ● Lesson Plan PREA 2014 ● Powerpoint PREA 2014 ● PREA Training Activities ● PREA Training Group Activities <p>Interviews</p> <ul style="list-style-type: none"> ● Intake staff ● Random Staff <p>The District 1 Juvenile Detention Center has procedures to provide disabled residents with the opportunity to participate in efforts to prevent and respond to sexual abuse and harassment. In addition to written and visual education materials, District 1 Juvenile Detention Center has agreements with interpreters to assist in effectively communicating with residents with disabilities. The Kootenai County District Court provides these interpreters. In order to provide equal access to important information for residents who, because of a non-English-speaking cultural background or physical impairment, are unable to understand or communicate adequately in English, an interpreter may be necessary. Interpreters provide services during arraignments, hearings, trials, interviews with counsel, and other proceedings. Residents with intellectual disabilities are given extra attention during the intake process to ensure they understand the information. If necessary, a Mental Health staff member aids in this process.</p> <p>The District 1 Juvenile Detention Center staff members have not experienced any incarcerated blind or deaf residents. However, the intake staff members are prepared to provide information in a format that will allow residents with limited reading skills, hearing disabilities, intellectual disabilities or low vision to know and understand all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Staff members will read information to residents with limited reading skills.</p> <p>The Auditor conducted intake staff interviews with two Staff members; in each interview, Staff indicated they not only provided the information to residents but also took the time to ensure the residents understood the material. The Staff indicated they had never completed an intake on a deaf or blind resident. However, they were prepared to provide information concerning the entire intake process to residents who were either blind or deaf. The Detention Manager indicated during his interview that procedures are in place to ensure residents with disabilities and those who are limited in the English language have an equal opportunity to participate in the Agency's effort to prevent sexual abuse and harassment. As determined through staff interviews, District 1 Juvenile Detention Center staff do not rely on resident interpreters, resident readers or other types of resident assistants.</p> <p>The Auditor reviewed samples of PREA Posters in both English and Spanish. The PREA information provided to residents is also available in Spanish. Finally, interviews with facility staff indicate a variety of methods are available to ensure residents understand the material as it is presented to them.</p> <p>The Auditor observed PREA signs that could be read and understood from the seated position. Residents who used wheelchairs or walkers had easy access to the phones used for reporting.</p> <p>The District 1 Juvenile Detention Center provides printed materials written in large font and plain language. The Orientation pamphlet is available in Spanish and English.</p> <p>The District 1 Juvenile Detention Center takes extra measures (one-on-one) when providing PREA-related material to residents with disabilities. Intake staff members were able to describe the steps the facility takes to ensure that residents with disabilities, Deaf residents, and residents who are limited English proficient understand agency sexual abuse and sexual harassment policies and know how to report and get help if they have been victimized.</p> <p>The District 1 Juvenile Detention Center has procedures established that will provide disabled residents with the opportunity</p>	

to participate in efforts to prevent and respond to sexual abuse and harassment. The PREA Coordinator indicated that procedures are in place to ensure residents with disabilities and those who are limited in the English language have an equal opportunity to participate in the Agency's effort to prevent sexual abuse and harassment.

Policy 8.03 Prison Rape Elimination Act, page 3, addresses 115.316 (a) (b).

Interviews with Intake staff and random staff address 115.316 (c).

The District 1 Juvenile Detention Center substantially complies with 115.316: Residents with disabilities and residents who are limited English proficient.

115.317	Hiring and promotion decisions
<p>Auditor Overall Determination: Meets Standard</p>	
<p>Auditor Discussion</p>	
<p>Documents</p> <ul style="list-style-type: none"> • Policy 2.03 Administrative Policies • PREA Employment Screen • Previous Employer Check 7-8-2022 • Ten Employee Record Checks <p>Interviews:</p> <ul style="list-style-type: none"> • Administrative (Human Resources) (Agency Head/Detention Manager) <p>The District 1 Juvenile Detention Center policy prohibits hiring or promoting anyone who may have been previously involved in sexual abuse in a prison, jail, lockup, community confinement facility or juvenile facility. Agency policy requires consideration of sexual harassment issues during hiring. Criminal background checks are required. The entire process for hiring or promoting Staff is coordinated through the District 1 Juvenile Detention Center Detention Manager/Agency Head.</p> <p>After the initial application, an initial interview, criminal background record checks, and child abuse registry checks are completed. The District 1 Juvenile Detention Center does not hire, promote, or enlist the services of anyone who:</p> <ol style="list-style-type: none"> a. 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); b. 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; or c. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b). <p>Background checks are conducted on all new employees. These checks include the Sex Offender Registry, Child abuse registry, Check of work references, making 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, Criminal History check, Fingerprint check and an Idaho Repository Check (Idaho Court records search). New applicants also complete a PREA Employment Screen, which requires applicants to answer questions concerning previous involvement in sexual abuse or harassment in a prison, jail, lockup, community confinement facility or juvenile facility. There is an affirmative duty to disclose any such misconduct. Making false statements, false documentation or omissions on any part of the application process is grounds for termination.</p> <p>Finally, all employees will complete criminal history checks every five years.</p> <p>The District 1 Juvenile Detention Center considers any incidents of sexual harassment in determining whether to hire or promote anyone or enlist the services of any contractor who may have contact with residents.</p> <p>Six new employees were hired within the past 12 months, and all criminal background and child registry checks were completed appropriately. The District 1 Juvenile Detention Center utilizes Idaho's Bureau of Criminal Identification for records checks. The Bureau of Criminal Identification is Idaho's central repository of criminal records, fingerprints, and crime statistics. BCI serves as the control terminal agency for the National Crime Information Center (NCIC).</p> <p>Background checks are completed every five years for current employees. The Auditor reviewed ten employee files; initial criminal background checks and five-year criminal background checks were completed. Employees who fail to disclose information concerning misconduct can be terminated from employment. The Administrative Officer (Agency Head/Detention Manager) confirmed that background checks are completed every five years and that appropriate sanctions are available for staff members who fail to report misconduct. The Administrative Officer further indicated that when a former employee applies for work at another institution, upon request from that institution, the facility provides information on substantiated allegations of sexual abuse or sexual harassment to the requesting Agency. The Auditor notes that employee criminal background checks are required every five years; District 1 Juvenile Detention Center meets this standard.</p> <p>The Auditor reviewed policies, application materials, personnel review materials, and personnel files. As indicated by the Administrative Officer, any deception, misinformation or misinformation by the omission of information at any stage during the</p>	

application and Employment Screening Process shall disqualify the applicant from employment with the Department.

Policy 2.03 Administrative Policies, page 1-2 and the Administrative staff interview addresses 115.317 (a) (b) (c) (d) (e) and (g).

PREA Employment Screen and Administrative Staff interview addresses 115.317 (f)

Previous Employer Check 7-8-2022 and Administrative Staff interview addresses 115.317 (g).

The District 1 Juvenile Detention Center substantially complies with standard 115.317: Hiring and promotion decisions.

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ul style="list-style-type: none"> • Policy 7.11 Cameras <p>Interviews:</p> <ul style="list-style-type: none"> • Agency Head/Detention Manager • PREA Coordinator <p>District 1 Juvenile Detention Center has not acquired a new facility or substantially expanded or modified the existing facility since August 20, 2012. District 1 Juvenile Detention Center has made minor changes to the video system; specifically, they have repaired cameras and added one camera to the training room and two to the perimeter. The PREA Coordinator indicated these changes were made to improve District 1 Juvenile Detention Center's ability to protect residents from sexual abuse. Currently, there are 67 cameras; all have recording capability. In low activity areas, cameras are activated by motion sensors. Recordings are temporarily saved on the hard drive. Individual incidents can be recorded on CDs or saved in a designated file on the network for documentation purposes. Transfer of video footage to other agencies may only occur if mandated by court order or by approval of the Director.</p> <p>Policy 7.11 Cameras and interviews with the PREA Coordinator and the Agency Head/Detention Manager address 115.318 (a) and (b).</p> <p>The District 1 Juvenile Detention Center complies with standard 115.318: Upgrades to facilities and technologies.</p>

115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents:

- Policy 8.03 Prison Rape Elimination Act
- Idaho Sexual Assault Response Guidelines
- MOU North Idaho Violence Prevention Center
- District 1 Juvenile Detention Center Response to Sexual Assault/Abuse Incident (Checkoff sheet)

Interviews:

- PREA Coordinator
- Medical Services
- Investigator

The District 1 Juvenile Detention Center investigator only conducts administrative investigations involving sexual harassment. The Couer d'Alene Police Department conducts criminal investigations. The Couer d'Alene Police Department is responsible for investigating all allegations of criminal sexual abuse at the District 1 Juvenile Detention Center. The Couer d'Alene Police Department follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions and administrative proceedings, which occur after the criminal process is completed. The protocol is developmentally appropriate for youth and minimizes the trauma to the child victim. (Idaho Sexual Assault Response Guidelines)

The District 1 Juvenile Detention Center offers all residents who experience sexual abuse access to forensic medical examinations at an outside facility, without financial cost; as noted in the Idaho Sexual Assault Response Guidelines page 31, "Sexual assault examinations will be provided to victims at no cost". Examinations are performed by Sexual Assault Nurse Examiners (SANEs) at Kootenai Health.

The Auditor reviewed the Kootenai Health information concerning Sexual Assault crisis intervention. Specifically, Kootenai Health provides the following: Patients in whom sexual assault is suspected or reported are to be processed quickly and with special attention to physical needs, privacy, and emotional support. Proper collection and storage of evidence and documentation are of the utmost importance. Victims of sexual assault are provided access to a Sexual Assault Advocate from the North Idaho Violence Prevention Center (Safe Passage). Advocates are present during the sexual assault examination. Additionally, an advocate will assist with transportation and interpretation of medical-legal needs and follow up as needed.

The Auditor confirmed that the Medical and Mental Health Staff are aware of the procedures for coordinating emergency medical care for victims of sexual assault. Medical Staff follows specific procedures, including evidence protection, prior to sending a victim to the Emergency room. Mental Health staff coordinate with Safe Passage for advocate services.

The Investigator indicated he would coordinate criminal investigations of alleged incidents of sexual misconduct in cooperation with the Couer d'Alene Police Department. The Investigator would coordinate staff interviews and give the Couer d'Alene Police Department unlimited access to the facility as needed to conduct a criminal investigation.

There have been no incidents at District 1 Juvenile Detention Center that required a forensic medical exam in the past 12 months. The Auditor reviewed the Memorandum of Understanding between the District 1 Juvenile Detention Center and the North Idaho Violence Prevention Center (Safe Passage). In addition, the Auditor interviewed a Sexual Assault Advocate from Safe Passage. Both the Agency and the Advocate indicated a victim of a sexual assault would be provided an advocate and services for intervention and related assistance. The Advocate stated she would support the victim through the forensic examination and investigatory interviews. The PREA Coordinator established an appropriate Memorandum of Understanding that meets the requirements to provide services to sexual abuse or harassment victims.

Policy 8.03 Prison Rape Elimination Act, Idaho Sexual Assault Response Guidelines, pages 13-15 and 31, and interviews with the Investigator, PREA Coordinator and Medical Staff address 115.321 (a) (b) (c) (f) (g).

MOU North Idaho Violence Prevention Center addresses 115.321 (d) (e) (h)

The District 1 Juvenile Detention Center complies with standard 115.321: Evidence protocol and forensic medical examinations.

115.322	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> • Policy 1.02 Reporting Child Abuse/Neglect • Investigation Flow Chart <p>Interviews:</p> <ul style="list-style-type: none"> • Investigator/PREA Coordinator • Agency Head/Detention Manager <p>District 1 Juvenile Detention Center supervisors ensure that an administrative or criminal investigation is completed for all sexual abuse and sexual harassment allegations. The Investigator coordinates administrative and criminal investigations of alleged incidents of sexual misconduct in cooperation with local law enforcement as needed. The District 1 Juvenile Detention Center Policy 1.02 Reporting Child Abuse/Neglect ensures that allegations of sexual abuse or sexual harassment are referred for investigation to the Investigator (Administrative) or the Couer d'Alene Police Department (Criminal).</p> <p>The Couer d'Alene Police Department has the legal authority to conduct criminal investigations. Additionally, the police department's Victim Services Advocacy Unit is committed to reducing the trauma that victims and witnesses may experience following sexual assaults and sexual abuse of children. The Couer d'Alene Police Department seeks to make the criminal justice system more understandable, accessible, and responsive to the concerns of victims and their families.</p> <p>The District 1 Juvenile Detention Center documents all referrals. The Auditor interviewed the Investigator at District 1 Juvenile Detention Center. During the interview, the Investigator indicated he would coordinate the release of any documentation, coordinate staff interviews and give the Couer d'Alene Police Department unlimited access to the facility as needed for conducting a criminal investigation.</p> <p>The District 1 Juvenile Detention Center investigator conducts internal investigations of employee misconduct. The Investigator participated in the NIC Training Class "Investigating Sexual Abuse in a Confinement Setting". Interviews with the Agency Head/Detention Manager and the PREA Coordinator/Investigator confirm that referrals and investigations would be completed for any sexual assault or sexual harassment incidents.</p> <p>District 1 Juvenile Detention Center ensures both administrative and criminal investigations are completed for all allegations of sexual abuse and sexual harassment. District 1 Juvenile Detention Center has procedures requiring investigations by the Couer d' Alene Police Department. District 1 Juvenile Detention Center staff have been trained to conduct administrative investigations involving sexual abuse or harassment. If an administrative investigation potentially involves criminal behavior, the investigation is referred to the Couer d'Alene Police Department. The agency documents all referrals. The District 1 Juvenile Detention Center website provides information concerning PREA, and the PREA Policy is posted on the Web site (https://www.kcgov.us/353/Report-Abuse).</p> <p>Policy 1.02 Reporting Child Abuse/Neglect, the Investigation Flow Chart, the facility website and interviews with the Investigator/PREA Coordinator address 115.322 (a) (b) and (c).</p> <p>The District 1 Juvenile Detention Center complies with standard 115.322: Policies to ensure referrals of allegations for investigations.</p>

115.331	Employee training
<p>Auditor Overall Determination: Exceeds Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> • Policy 3.02 Security Staff Training • Powerpoint Presentation: The Prison Rape Elimination Act • Outline PREA Education Video • Handout 1 Definitions of Sexual Abuse • Handout 2 PREA Incident enactment (Desktop Training) • Handout 3 PREA Intake Assessment • Handout 4 Match Word PREA Definitions • Initial PREA Training Form • Juvenile PREA – POST Accredited Course • Resident PREA Education Class • PREA Policy Test • Training records employees and contractors/volunteers • PREA Training Excel database <p>Interviews:</p> <ul style="list-style-type: none"> • Random Staff <p>The District 1 Juvenile Detention Center trains all employees who may have contact with residents on: the zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities pursuant to the PREA Standards; residents' right to be free from sexual abuse and sexual harassment; the right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment; the common reactions of 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 lesbian, gay, bisexual, transgender, intersex, or gender non-conforming residents; and laws related to mandatory reporting of sexual abuse and the age of consent. The training covers both male and female residents. District 1 Juvenile Detention Center provides employees with refresher training every year.</p> <p>Employees are well versed in the District 1 Juvenile Detention Center's current sexual abuse and sexual harassment policies and standard operating procedures. District 1 Juvenile Detention Center documents that employees understand their training. The Auditor reviewed employee training records, and the PREA Coordinator provided copies of training records for the employees.</p> <p>The Auditor reviewed ten (10) Employee Training records; each file contained documentation on the hire date, PREA Training Dates and Acknowledgement documents. The training records indicate that PREA Training is provided annually.</p> <p>Twelve random staff interviews were conducted. The staff members interviewed by the Auditor indicated a clear understanding of the Prison Rape Elimination Act. The random Staff interviewed were able to recall information from the training, such as the zero tolerance for sexual assault and sexual harassment, professional and gender-specific pat search procedures, how to respond to sexual assaults and the first responder's duties. Staff members recalled how to avoid inappropriate relationships with residents, the dynamics of sexual abuse in prison, and how to detect signs of sexual abuse. All employees have been trained, and the Auditor confirmed the training records of the employees. All Staff interviewed confirmed their participation in PREA training and knowledge of the training curriculum.</p> <p>Policy 3.02 Security Staff Training, various training aids, training records and random staff interviews address 115.331 (a) (b) (c) (d).</p> <p>The District 1 Juvenile Detention Center complies with standard 115.331: Employee training.</p>	

115.332	<p>Volunteer and contractor training</p> <p>Auditor Overall Determination: Exceeds Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> • Policy 1.03 Volunteer Staff • Powerpoint: Volunteers and Contractors • PREA Lesson Plan Contractors/Volunteers • Security Briefing PREA Contractors • Security Briefing Volunteers • Contractor Training Records <p>Interviews:</p> <ul style="list-style-type: none"> • Contractors (Teachers and Education Liason) <p>Volunteers and contractors are informed of the resident's right to be free from sexual abuse and to be free from retaliation for reporting sexual abuse and harassment incidents. The District 1 Juvenile Detention Center maintains documentation confirming that contractors and volunteers understand their training.</p> <p>The Auditor interviewed three Contractors (two Teachers and one Education Liason). The Contractors stated they had been trained in their sexual abuse and sexual harassment prevention, detection, and response responsibilities. The Contractors stated they had participated in a Contractor orientation class. The Contractors further indicated they understood the zero-tolerance policy.</p> <p>Contractors and Volunteers are informed of the resident's right to be free from sexual abuse and to be free from retaliation for reporting sexual abuse and harassment incidents. The District 1 Juvenile Detention Center maintains documentation confirming that volunteers and contractors understand their training. The Auditor reviewed the training records of three contractors.</p> <p>Policy 1.03 Volunteer Staff, the Powerpoint: Volunteers and Contractors, the PREA Lesson Plan Contractors/Volunteers, the Security Briefing PREA Contractors/Volunteers and an interview with three Contractors address 115.332 (a), (b) and (c).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.332: Volunteer and Contractor training.</p>
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115.333	Resident education
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Documents:</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Resident PREA Education Class Outline • Resident PREA Education Video Outline • Resident Informational Pamphlet (English and Spanish) • Resident Orientation Pamphlet • Resident files documenting admission dates, orientation dates, and comprehensive education dates <p>Interviews</p> <ul style="list-style-type: none"> • Random Resident • Intake Staff <p>Residents receive information on zero tolerance, how to report sexual abuse and harassment incidents, their right to be free from sexual abuse and harassment, and to be free from retaliation for reporting incidents. In addition, residents are informed about how the District 1 Juvenile Detention Center will respond to such incidents. Intake Staff interviews verify that residents receive the appropriate information. In addition to this information, residents are provided an orientation pamphlet and an informational pamphlet about Zero Tolerance and how to report sexual abuse and harassment. The Auditor confirmed all residents received this information. Interviews with residents also confirm that the District 1 Juvenile Detention Center Staff provide information on reporting incidents of sexual abuse. The Agency documents the receipt of this information. The Auditor reviewed ten (10) random intake files; each contains documentation concerning the orientation date (intake), screening date, PREA Acknowledgement date, initial education date and comprehensive education date. All residents who remain at the District 1 Juvenile Detention Center for more than ten days receive comprehensive education on PREA.</p> <p>Throughout the facility, information is posted about PREA, Zero Tolerance and how to report incidents of sexual abuse. This information is presented in both Spanish and English. This information is visible and readily available. There is information provided to the residents concerning the services of Safe Passage. Safe Passage provides 24-hour crisis line services, legal advocacy, counseling, sexual assault intervention services, prevention education, family advocacy and support for children affected by violence. Resident interviews confirm this information is available.</p> <p>Comprehensive educational sessions are conducted on Fridays and involve a review of PREA and a video concerning the residents' right to be free from sexual abuse, harassment and retaliation while incarcerated. Residents' participation in these educational classes is documented.</p> <p>Policy 8.03 Prison Rape Elimination Act, Policy, Resident PREA Education Class Outline, Resident PREA Education Video Outline, Resident Informational Pamphlet (English and Spanish), Resident Orientation Pamphlet, Resident files documenting admission dates, orientation dates, and comprehensive education dates and interviews with random residents and intake staff address 115.333 (a) (b) (c) (d) (e) and (f).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.333: Resident education.</p>	

115.334	Specialized training: Investigations
	<p data-bbox="293 134 747 159">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="293 195 488 220">Auditor Discussion</p> <p data-bbox="293 254 406 279">Documents</p> <ul data-bbox="332 327 1089 352" style="list-style-type: none"> • Training Certificate PREA: Investigating Sexual Abuse in a Confinement Setting <p data-bbox="293 380 391 405">Interviews</p> <ul data-bbox="332 453 464 478" style="list-style-type: none"> • Investigator <p data-bbox="293 562 1435 993">The District 1 Juvenile Detention Center staff conduct administrative investigations involving sexual abuse and sexual harassment. The Investigator has received training in conducting investigations in confinement settings. This training was online and coordinated by the National Institute of Corrections. The training title is "Investigating Sexual Abuse in a Confinement Setting". That training includes the proper use of Miranda and Garrity warnings, evidence collection, and the criteria and evidence required to substantiate a case for administrative action or criminal referral. The Auditor reviewed the training certificate and interviewed the Investigator. The Investigator was aware of his responsibilities during an investigation; he indicated that the investigation would begin immediately upon notification of an allegation. Any allegation that potentially involved criminal behavior would require police involvement. His training from NIC covered all areas of the investigative process, interviewing techniques, evidence collection, evidence protection and victim advocacy. Securing and processing the scene for evidence. Securing all evidence and maintaining the integrity of the evidence. Seeing to the victim's needs and providing advocacy support. The Investigator stated he would review memorandums, collect as much data as possible, and write a report. The training reviewed good interpersonal communication skills with resident victims, assailants, and witnesses. Understanding of the dynamics of resident sexual violence. Establishing good working relationships with outside agencies, hospitals, prosecutors, and investigators.</p> <p data-bbox="293 1022 1435 1108">The Investigator noted that Anonymous or third-party reports would be thoroughly investigated as soon as possible. A third party or an anonymous tip would be treated the same as a direct report. Specifically, the Investigator indicated he would begin by introducing himself to the victim and then proceed with a normal investigation process.</p> <p data-bbox="293 1138 1414 1257">The Investigator indicated that if the incident were criminal in nature, he would not collect specific physical and DNA evidence, he would aid the Couer d'Alene Police Department by providing victim and perpetrator information such as any pertinent central file information, information concerning prior complaints and reports of prior sexual abuse and he would provide any information on prior investigations involving either the victim or the perpetrator.</p> <p data-bbox="293 1287 1136 1312">The review of the training records and investigator interview address 115.334 (a) (b) and (c).</p> <p data-bbox="293 1341 1284 1367">The District 1 Juvenile Detention Center complies with Standard 115.334: Specialized training: Investigations.</p>

115.335	<p>Specialized training: Medical and mental health care</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> ● Policy 8.03 Prison Rape Elimination Act ● Training Certificate Medical PREA 201 for Medical And Mental Health Practitioners ● Training Certificate Mental Health PREA 201 for Medical And Mental Health Practitioners <p>Interviews</p> <ul style="list-style-type: none"> ● Medical Staff ● Mental Health Staff <p>The District 1 Juvenile Detention Center provides PREA training to the facility's medical and mental health practitioners. The training includes detecting signs of sexual abuse/harassment, preventing the destruction of evidence, responding to victims, and reporting allegations or suspicions of sexual abuse and sexual harassment. Facility medical staff do not conduct forensic examinations. The Auditor confirmed that training was provided to Medical and Mental Health staff. Interviews with the Medical Staff and Mental Health staff confirmed the training. During the interview with Medical Staff, the Auditor was informed about the District 1 Juvenile Detention Center's standards for Health Care Staff. Specifically, Medical Staff are required to: provide timely first aid and treatment of visible injuries; preserve potential evidence (including evidence of sexual activity); provide access to forensic examinations performed by a Sexual Assault Nurse Examiner (SANE), trained to examine the victim; provide access to victim advocate for emotional support; remain with the victim until they are escorted outside the facility; ensure and coordinate necessary care such as emergency contraception, HIV testing and counseling and medications that might be given once more information is gathered. The Medical staff member indicated she would work in conjunction with the SANE Staff at Kootenai Health.</p> <p>The Mental Health staff member who participated in an interview understood the District 1 Juvenile Detention Center PREA policy and the appropriate protocols for dealing with sexual assault and sexual harassment incidents.</p> <p>The Mental Health Staff member had received specialized training on detecting signs of sexual abuse and how to respond effectively to victims of sexual abuse. Specialized training also includes victim identification, interviewing, and interventions. The Auditor reviewed training records for the Mental Health staff member.</p> <p>The Policy 8.03 Prison Rape Elimination Act, the Training Certificate for Medical and Mental Health staff and the interviews with Medical and Mental Health Staff address 115.335 (a) (b) and (c).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.335: Specialized training: Medical and mental health care.</p>
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115.341	Obtaining information from residents
<p>Auditor Overall Determination: Meets Standard</p>	
<p>Auditor Discussion</p>	
<p>Documents</p> <ul style="list-style-type: none"> ● Policy 15.02 Admission Procedures ● PREA Intake Form Part 1 ● PREA Intake Form Part 2 ● MAYSI II ● Alaska Screen tool <p>Resident file review</p> <p>Interviews:</p> <ul style="list-style-type: none"> ● Staff who perform risk assessments ● Random Residents <p>All residents are provided Risk Assessments upon intake. The policy provides that assessments are conducted within the first 72 hours; however, the Auditor notes that these assessments are done almost immediately after the initial intake. The assessment includes the mental, physical and developmental disability of the resident, the age of the resident, the physical build of the resident, previous incarcerations, criminal history, prior sex offenses, whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming, prior sexual victimization and the resident's perception of their vulnerability. Residents are not disciplined for failing to answer any questions. All information gathered during intake is shared with only those Staff that need to know. Sensitive information is not shared unnecessarily. Interviews with Intake staff confirmed the use of the assessment tool. In addition, resident interviews indicated the use of the assessment tool.</p> <p>Screening staff affirmatively ask residents about their sexual orientation and gender identity by inquiring if they identify as lesbian, gay, bisexual, transgender, or intersex (LGBTI), in addition to making a subjective determination about perceived status. Residents are reassessed when warranted by the circumstances (e.g., new referral, an incident of sexual abuse or receipt of new and relevant information, etc.) The PREA screening information is used to assist in decisions regarding a Resident's housing unit, educational needs and interventions. The screening process is designed to encourage Residents to disclose sensitive information about previous sexual abuse and vulnerabilities they may have, including their sexual orientation and gender identity.</p> <p>All information gathered during intake is shared with only those Staff that needs to know. Sensitive information is not shared unnecessarily. Residents at the District 1 Juvenile Detention Center indicated they had been queried on questions concerning whether they had been victims of sexual abuse or sexual harassment or if they had been arrested or charged with a sex offense.</p> <p>Each resident is provided with a Medical review upon completing the intake process. This is a comprehensive review of the resident's physical and mental health. The visual observation of the resident includes whether the resident exhibits potential risk for victimization (e.g., age, small build, femininity, 1st-time offender, passive or timid appearance). Through both a document review and interview, a determination is made concerning whether the resident is a victim of sexual abuse, if they are vulnerable, if they have ever been arrested for a sex offense and how the resident identifies themselves (e.g., gay, lesbian, bisexual, transgender, intersex or gender non-conforming).</p> <p>Interviews with Intake staff, Medical Staff and Mental Health staff confirmed the use of the assessment tools. The Intake staff indicated their responsibilities included assessing all residents, especially those with special needs or those who may be vulnerable or express feelings of vulnerability. The Intake officers indicated the need to provide safe housing and program resources that ensured a safe environment for all residents. The Auditor reviewed the files of several residents. The files contained the appropriate Intake forms, and Intake Officers and the residents signed them. The Auditor also reviewed intake forms from the Medical and Mental Health staff.</p> <p>The Auditor notes that if a resident identifies as transgender, the intake staff includes information that indicates the resident's preferred gender identification, name preference, where they would prefer to be housed (male or female unit) and if they prefer a male or female officer for the purpose of conducting pat searches.</p>	

Based on a review of the intake process, a review of the assessment forms, the Medical Assessment form and the Mental Health Assessment forms, and interviews with Intake staff, Medical Staff and Mental Health staff, there is substantial compliance with this standard.

The Policy 15.02 Admission Procedures, the PREA Intake Form Part 1 and Part 2, MAYSI II, the Alaska Screening tool and interviews with Staff who perform risk assessments and random residents address 115.341 (a), (b), (c), (d) and (e).

The District 1 Juvenile Detention Center complies with Standard 115.341: Screening for risk of victimization and abusiveness

115.342	<p>Placement of residents</p> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 15.02 Juvenile Admission and Release • Roommate Classification Guidelines <p>Interviews:</p> <ul style="list-style-type: none"> • PREA Coordinator • Staff who Conduct Risk Assessments • Transgender Resident <p>The District 1 Juvenile Detention Center utilizes the intake information to make decisions on housing assignments. The needs of each resident are taken into consideration. Detention staff indicated they would determine housing on a case-by-case basis and have appropriate facilities available to ensure the safety of all residents. The PREA Coordinator stated during his interview that the Agency would consider a transgender or intersex resident's views concerning safety. More specifically, for youth who identify as transgender or intersex, Mental Health staff would assist in the intake process to ease any challenges perceived by the youth. The District 1 Juvenile Detention Center does not have an administrative/disciplinary segregation unit. All residents are placed in general housing units.</p> <p>Preferences concerning housing assignments for LGBTQI youth are always considered. LGBTQI youth receive fair and equal treatment without bias. Mental Health Staff monitors transgender or intersex residents. Any issues concerning residents who may be vulnerable due to their sexual orientation are documented so that supervisors, if necessary, can adjust assignments. All residents are provided the opportunity to shower separately from other residents.</p> <p>The Auditor interviewed one Resident who identified as Transgender. During the interview, the Resident indicated Staff asked about her safety when she arrived at the facility. The Resident stated she was placed in a general housing unit and allowed to shower privately. The Resident further stated she had never been stripped searched while at the facility.</p> <p>Policy 15.02 Juvenile Admission and Release, the Roommate Classification Guidelines and interviews with the PREA Coordinator, Staff who Conduct Risk Assessments and a Transgender youth address 115.342 (a) – (j).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.342: Use of screening information.</p>
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115.351	<p>Resident reporting</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 1.02 Reporting Child Abuse/Neglect • Policy 8.03 Prison Rape Elimination Act • PREA Report Response • Resident Information Pamphlet <p>Interviews</p> <ul style="list-style-type: none"> • Random Residents • Random Staff <p>There are multiple ways for Residents to report sexual abuse and sexual harassment privately. The Resident Orientation Pamphlet addresses reporting options such as telling Staff, Nurse, Mental Health clinicians, Teachers, Parents or other adults; Residents are given a report form during intake to use as necessary; a resident can report on the exit Questionnaire; a resident can utilize PREA Reporting phone number (this phone number is connected to the PREA Coordinator's Office); a resident can call the community victim advocate hotline and may request to remain anonymous. The phone number is posted on all resident phones.</p> <p>Third-party reports of abuse and harassment can be made on behalf of a resident. Reports can be made directly to the PREA Coordinator, Assistant Director, or Director or contact the CDA Police department as indicated in the Parent/Guardian Information Pamphlet.</p> <p>Staff can privately report to a supervisor or the Director. Staff members are informed that any issues related to sexual harassment or sexual abuse can be reported confidentially to the Director.</p> <p>Resident interviews confirm knowledge of the reporting procedures. Staff interviews confirm knowledge of reporting procedures.</p> <p>The Policy 1.02 Reporting Child Abuse, Policy 8.03 Prison Rape Elimination Act, the PREA Report Response, the Resident Information Pamphlet and interviews with Random Residents and Random Staff address 115.351 (a) – (e).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.351: Resident reporting.</p>
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115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act <p>District 1 Juvenile Detention Center does not have administrative procedures to address resident grievances regarding sexual abuse. There are no time limits and no informal grievance process. If an allegation is made, it is investigated immediately.</p> <p>An agency that has an inmate grievance process or any other administrative remedies process is only exempt from Standard 115.352 if it can demonstrate that as a matter of written agency policy, grievances related to sexual abuse or allegations of sexual abuse (i.e., allegations of sexual abuse, a fear of sexual abuse, or allegations of mishandling of an incident of sexual abuse) are immediately converted to investigations that are outside of the Agency's administrative remedies process, and are not considered by the Agency to be grievances.</p> <p>Policy 8.03 Prison Rape Elimination Act, page 4, section VIII states, "The resident grievance procedure is not intended for PREA reporting. There are no administrative procedures to address resident grievances regarding sexual abuse. All allegations will be subject to reporting procedures.</p> <p>District 1 Juvenile Detention Center is exempt from Standard 115.352.</p>

115.353	Resident access to outside confidential support services and legal representation
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Lesson Plan PREA Education • Resident Information Pamphlet • MOU Sage Passage • Telemate instructions for residents <p>Interviews</p> <ul style="list-style-type: none"> • Random Residents • Mental Health staff • Safe Passage Victim Advocate <p>District 1 Juvenile Detention Center has established a Memorandum of Understanding with the Safe Passage Violence Prevention Center. These advocates provide support related to sexual assault. Residents have access to the mailing address and telephone numbers, including a toll-free number that provides confidential communication between residents and the Center. Several of the residents indicated their awareness of the Sexual Assault Center. However, of the residents interviewed, no one indicated they had taken advantage of these services.</p> <p>The facility's Mental Health Clinician will facilitate access to outside victim advocates for emotional support services related to sexual abuse. Residents have access to community-based victim advocate services. Safe Passage Violence Prevention Center is the largest Agency in North Idaho, providing resources, support, and crisis intervention for adults and children affected by domestic and sexual violence, stalking, and human trafficking. Programs include 24-hour crisis line services, an emergency shelter, legal advocacy, counseling, sexual assault intervention services, prevention education, bystander intervention training, family advocacy and support for children affected by violence. Safe Passage services are completely free and strictly confidential.</p> <p>In addition to providing advocacy services, Safe Passage staff provides classes at the facility twice a month. This outreach program offers presentations based on No Means No, a statewide curriculum that covers topics like Healthy Relationships, Gender Norms and Media, Dating Violence and Technology Safety in Dating Relationships.</p> <p>Residents are provided access to Legal representation. Before giving them access, the facility informs residents 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. This is done during resident education and stated in the Resident Information Pamphlet and on postings near the phones. Finally, the Immigration service's contact information is provided for youth detained solely for civil immigration purposes (the Auditor notes that District 1 Juneville Detention Center does not provide housing for the Department of Homeland Security).</p> <p>All residents interviewed indicated they had confidential access to their attorneys before any hearings. Additionally, all residents interviewed stated they are allowed the opportunity to visit with family.</p> <p>The Policy 8.03 Prison Rape Elimination Act, the Lesson Plan PREA Education, the Resident Information Pamphlet, the MOU with Safe Passage, the Telemate instructions for residents and the interviews with Random Residents and Mental Health staff address 115.353 (a), (b), (c), and (d).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.353: Resident access to outside confidential support services.</p>

115.354	Third-party reporting
	<p data-bbox="293 134 748 161">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="293 195 488 222">Auditor Discussion</p> <p data-bbox="293 254 407 281">Documents</p> <ul data-bbox="331 327 748 386" style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 1.02 Reporting Child Abuse/Neglect <p data-bbox="293 411 391 438">Interviews</p> <ul data-bbox="331 485 537 512" style="list-style-type: none"> • Random Residents <p data-bbox="293 537 1446 722">The District 1 Juvenile Detention Center has established a method to receive third-party reports of sexual abuse. This information is available on the Kootenai County website https://www.kcgov.us/353/Report-Abuse. Information is available to the Public on how to report resident sexual abuse or sexual harassment on behalf of the residents. Resident interviews indicated a clear understanding of how to make a third-party report. Most residents indicated they could inform their attorney, family member or probation officer and those individuals could contact either a staff member or the Director and report an incident.</p> <p data-bbox="293 747 1406 840">District 1 Juvenile Detention Center Web Site addresses the requirements of this standard. Third parties are informed of reporting procedures on the website. In addition, information is provided to parents and legal guardians via the Parent Pamphlet. Resident interviews confirm awareness of the third-party reporting capabilities.</p> <p data-bbox="293 865 1159 892">The District 1 Juvenile Detention Center complies with Standard 115.354: Third-party reporting.</p>

115.361	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ul style="list-style-type: none"> • Policy 1.02 Reporting Child Abuse/Neglect • Policy 8.03 Prison Rape Elimination Act <p>Interviews</p> <ul style="list-style-type: none"> • Random Staff • Prea Coordinator <p>The District 1 Juvenile Detention Center requires all Staff to immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment in the facility. Staff members are also required to report any retaliation against residents or Staff who have reported an incident of sexual assault or sexual harassment. Regardless of its source, District 1 Juvenile Detention Center employees, contractors, and volunteers who receive information concerning resident-on-resident sexual misconduct at District 1 Juvenile Detention Center, or who observe an incident of resident-on-resident sexual misconduct or have reasonable cause to suspect a resident is a victim of sexual misconduct, must: Immediately report the information or incident directly to their immediate Supervisor. If necessary (alleged criminal behavior), Law Enforcement will be notified by the Director or PREA Coordinator. Supervisory Staff, Mental Health staff or Medical Staff will report any incident of suspected child abuse or neglect to Child Protective Services. Policy 1.02 page 3, paragraph D. 1.</p> <p>Any District 1 Juvenile Detention Center employee, contractor, or volunteer who fails to report an allegation or coerces or threatens another person to submit inaccurate, incomplete, or untruthful information with the intent to alter a report, may face disciplinary action up to and including termination of employment. All District 1 Juvenile Detention Center staff, contractors, and volunteers must report any allegation of sexual abuse as required by mandatory reporting laws (Idaho State Code 16-1605). Residents are informed of the limitations of confidentiality between residents and Staff.</p> <p>Aside from reporting to the designated supervisors or officials and designated State or local service agencies, District 1 Juvenile Detention Center prohibits Staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Medical and Mental Health practitioners must report sexual abuse to designated Supervisors and state or local agencies. Policy 1.02 page 5, paragraph H. 1-3.</p> <p>Although no complaints have been received from a member of the Public, a procedure has been established for third-party reports to be sent to the Director. If an allegation is received, the Director would inform the PREA Coordinator, and steps would be taken to initiate an investigation. Staff members are required to report any violation of responsibilities that may have contributed to an incident or retaliation. (https://www.kcgov.us/353/Report-Abuse).</p> <p>According to Policy 1.02, page 5, paragraph H. 1-3. , the Detention Manager must promptly report any allegation of sexual abuse to the alleged victim's parents or legal guardians unless there is official documentation indicating that the parents/legal guardians should not be notified and if the alleged victim is under the guardianship of the child welfare system, report any allegation of sexual abuse to the alleged victim's caseworker instead of the parents or legal guardians.</p> <p>Policy 1.02 Reporting Child Abuse/Neglect addresses 115.361 (a) – (f)</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.361: Staff and Agency reporting duties.</p>

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 1.02 Reporting Child Abuse /Neglect <p>Interviews</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Head/Detention Manager • Random Staff <p>The District 1 Juvenile Detention Center Policy requires immediate action to protect residents from sexual abuse. Staff interviewed are aware of their reporting requirements and the steps that need to be taken to ensure the resident's safety. The Auditor reviewed Policy 8.03 and Policy 1.02, which outline a staff member's response to any allegation of sexual misconduct. As stated in procedures, all Staff, volunteers and contractors who receive an initial report of sexual misconduct are required to promptly intervene on the alleged victim's behalf to ensure the victim receives prompt medical and mental health, as appropriate to their needs and the circumstances of the alleged offense.</p> <p>Staff interviews revealed that Staff members were formally trained on and understand how to ensure residents are kept safe in the event they are at risk for imminent sexual abuse. Upon receipt of information that a resident is subject to a substantial risk of imminent sexual abuse, the District 1 Juvenile Detention Center staff indicated immediate action would be taken. Specifically, at a minimum, housing or programming changes would be initiated to separate or limit a threat between residents. All the random staff interviews indicated a similar answer. In her interview, the Agency Head/Detention Manager stated that facility staff would follow a plan of action that immediately eliminates the risk. Facility staff would protect the alleged victim first, and that decisions concerning housing assignments or education assignments would be incident based.</p> <p>Policies 8.03 and 1.02 and interviews with Staff address 115.362 (a).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.362: Agency protection duties.</p>

115.363	<p>Reporting to other confinement facilities</p> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 1.02 Reporting Child Abuse /Neglect <p>Interviews</p> <ul style="list-style-type: none"> • PREA Coordinator • Detention Manager <p>Upon receiving an allegation that a resident was sexually abused while confined at another facility, District 1 Juvenile Detention Center policy requires notification to the head of the facility and appropriate Law Enforcement authorities within 72 hours. This notification is documented. Policy 1.02, page 5, paragraph 4 a-e indicates if an allegation is received that a resident was sexually abused before admission while confined at any other facility, the Supervisor on duty or the Director shall notify the head of the facility or the appropriate office of the Agency where the alleged abuse occurred and notify the appropriate investigative Agency for that facility. Such notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation. Staff shall document the information, which includes but is not limited to the date and time of calls to the Agency and the investigative Agency; the name of persons spoken to regarding the allegation; the type of details related to the Agency and investigative Agency and finally facilitate a follow-up meeting for the juvenile with a medical or mental health practitioner.</p> <p>In the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility is zero.</p> <p>In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities is zero.</p> <p>Policies 1.02 and 8.03 and interviews with the PREA Coordinator and Detention Manager address 115.363 (a) – (d).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.363: Reporting to other confinement facilities.</p>
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115.364	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> ● Policy 8.03 Prison Rape Elimination Act ● District 1 JDC Response to a Sexual Assault/Abuse Incident <p>Interviews</p> <ul style="list-style-type: none"> ● Random Staff <p>The District 1 Juvenile Detention Center staff members were interviewed concerning first responder responsibilities. Staff members are aware of their responsibility in this area. The staff members interviewed indicated a need to separate the victim from the abuser, preserve and protect the crime scene, advise the victim not to take any action that would compromise the evidence, and, if possible, ensure the alleged abuser did not take any action that would compromise any evidence. In addition, staff members were aware that they needed to contact their Supervisor, who would contact the Detention Manager.</p> <p>The Staff interviewed indicated they had received training that included the duties of a first responder. Medical Staff and Mental Health staff members were also aware of their responsibilities as first responders and the need to notify security staff.</p> <p>A first responder is required to: Separate the alleged victim and abuser; Preserve and protect the crime scene; request the alleged victim not to destroy evidence, and ensure the alleged abuser does not destroy evidence. A non-security staff responder must first request the victim not to destroy evidence and then notify a detention staff member.</p> <p>Interviews with Staff indicate they understand the duties of a first responder. Additionally, Policy 8.03 clearly describes the steps to be taken in response to an allegation of sexual abuse, assault or harassment. Those steps include separating the parties, cell reassignment, securing the scene, following evidentiary practices, medical evaluation, notification of Mental Health for follow-up and the need to monitor those who reported the incident for a minimum of 90 days to ensure no retaliation has occurred due to reporting or cooperation. During the past 12 months, District 1 Juvenile Detention Center has not had any incidents of sexual assault.</p> <p>In the past 12 months, the number of allegations that a resident was sexually abused at the District 1 Juvenile Detention Center is zero.</p> <p>The Policy 8.03 Prison Rape Elimination Act, pages 5-6, the District 1 JDC Response to a Sexual Assault/Abuse Incident checklist, and interviews with staff members address 115.364 (a) and (b).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.364: Staff first responder duties.</p>

115.365	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • District 1 JDC Response to a Sexual Assault/Abuse Incident <p>Interviews</p> <ul style="list-style-type: none"> • PREA Coordinator • Detention Manager • Random Staff <p>The District 1 Juvenile Detention Center has a written plan that includes immediate notification to the Detention Manager, the PREA Coordinator, the Couer d' Alene Police Department and sexual assault advocates. The Detention Manager stated during her interview that Staff is trained to follow the District 1 JDC Response to a Sexual Assault/Abuse Incident checklist that includes but is not limited to separating the involved individuals, contacting law enforcement, maintaining evidence integrity, contacting the PREA Coordinator, Community Partners, and assisting in transport if necessary.</p> <p>The District 1 JDC Response to a Sexual Assault/Abuse Incident checklist includes providing mental health and medical assistance for the alleged victim as soon as possible. Separating the alleged victim from the alleged perpetrator. Taking reasonable measures to identify, isolate, and separate witnesses. Securing the incident scene so items cannot be removed or introduced and allowing only assigned investigators to assess the scene.</p> <p>First responder training includes the following information: Separate the alleged victim and abuser, preserve and protect the crime scene until steps can be taken to collect evidence, and request that the alleged victim and abuser do not take any actions that could destroy physical evidence to include: brushing teeth, washing, urinating, defecating, drinking or eating. Isolate witnesses notify law enforcement, refer the victim for appropriate medical/mental health care, treat all victims with dignity and respect, and allow the victim to have an advocate present. A first responder should prepare a report regardless of its source. Reports should include observations at the time of the response, the incident's date and time, and the report's date and time. The report should also include who initially reported the allegation.</p> <p>The District 1 Juvenile Detention Center has developed a written institutional plan to coordinate actions in response to an incident of sexual abuse among Staff first responders, medical and mental health practitioners, investigators and facility leadership. There is substantial compliance with this standard.</p> <p>Policy 8.03, the District 1 JDC Response to a Sexual Assault/Abuse Incident checklist and interviews with the Detention Manager and PREA Coordinator address 115.365 (a).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.365: Coordinated response.</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • 1.02 Reporting Child Abuse/Neglect <p>Interviews</p> <ul style="list-style-type: none"> • Agency Head <p>The District 1 Juvenile Detention Center has no limit on its ability to remove alleged sexual abusers from contact with any residents pending the outcome of an investigation. No collective bargaining agreement would prohibit immediate action from protecting residents. The Agency Head/Detention Manager confirms there is no prohibition against removing alleged staff sexual abusers from contact with residents.</p> <p>Policy 1.02, pages 3-4, indicates neither the facility nor any Kootenai County representative shall enter into or renew any collective bargaining agreement or other agreement that limits the facility's ability to remove Staff alleged to be sexual abusers from contact with residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. All allegations of abuse will be referred to the CDA Police Department. The outcome of the police investigation will determine the next step in the process. Employees shall be afforded their rights and due process following Garrity Rules and other applicable laws.</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.366: Preservation of ability to protect residents from contact with abusers.</p>

115.367	Agency protection against retaliation
	<p data-bbox="293 134 747 159">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="293 195 488 220">Auditor Discussion</p> <p data-bbox="293 254 402 279">Documents</p> <ul data-bbox="332 327 724 384" style="list-style-type: none"> ● Policy 8.03 Prison Rape Elimination Act ● PREA Retaliation Status Check <p data-bbox="293 411 391 436">Interviews</p> <ul data-bbox="332 485 613 541" style="list-style-type: none"> ● PREA Coordinator ● Staff who monitor retaliation <p data-bbox="293 625 1435 867">The District 1 Juvenile Detention Center prohibits retaliation against residents and Staff who report sexual abuse or sexual harassment or cooperate with investigations. The Detention Manager and the PREA Coordinator are the designated staff members who monitor retaliation. Multiple measures are available, including removal of alleged Staff and alleged resident abusers, housing changes and advocate support. Monitoring can last for at least 90 days and includes periodic status checks. The Detention Manager and the PREA Coordinator are aware of their requirements for monitoring. The District 1 Juvenile Detention Center employs several protection measures, such as housing changes for resident victims or abusers, removal of alleged Staff or resident abusers from contact with victims, and seeking emotional support services for residents or Staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p data-bbox="293 896 1419 1077">For at least 90 days following a report of sexual abuse, District 1 Juvenile Detention Center monitors 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 see if there are any changes that may suggest possible retaliation by Residents or Staff. District 1 Juvenile Detention Center will act promptly to remedy any such retaliation. The PREA Coordinator and the Detention Manager indicated they would monitor resident disciplinary reports, housing or program change requests, negative performance reviews or reassignments of Staff to determine if monitoring was necessary.</p> <p data-bbox="293 1106 1422 1163">There have been no incidents in which monitoring for retaliation has occurred at District 1 Juvenile Detention Center in the past 12 months.</p> <p data-bbox="293 1192 1430 1249">Policy 8.03 Prison Rape Elimination Act and interviews with the PREA Coordinator and Staff who monitor retaliation address 115.367 (a) – (e).</p> <p data-bbox="293 1278 1304 1304">The District 1 Juvenile Detention Center complies with Standard 115.367: Agency protection against retaliation.</p>

115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act <p>Interviews</p> <ul style="list-style-type: none"> • PREA Coordinator <p>The PREA Coordinator asserts there were no circumstances within the last 12 months wherein isolation was used to protect a resident who was alleged to have suffered sexual abuse. The PREA Coordinator further asserts that residents at high risk for sexual victimization shall not be placed in isolation unless an assessment of all available alternatives has been made and a determination has been made that there are no available alternative means of separation from likely abusers.</p> <p>Residents who allege to have suffered sexual abuse may not be placed in isolation unless an assessment of all available alternatives has been made and a determination has been made that there are no available alternative means of separation from likely abusers. To the extent possible, access to programs, privileges, education, and work opportunities are not limited for those residents placed in isolation. The facility would document the reasons for restricting access and the length of time the restrictions would last. The resident's safety is always the highest priority. All attempts are made to maintain continuous access to programming, education and daily exercise.</p> <p>Policy 8.03 Prison Rape Elimination Act, page 8, paragraph D addresses 115.368 (a).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.368: Post-allegation protective custody.</p>

115.371	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Investigator Training Certificate • Investigation Record review <p>Interviews</p> <ul style="list-style-type: none"> • Investigator/PREA Coordinator • Agency Head/Detention Manager <p>Where sexual abuse is alleged, and possible criminal activity has occurred, the District 1 Juvenile Detention Center will contact the Couer d'Alene Police Department. The Couer d' Alene Police Department Investigators would gather and preserve direct and circumstantial evidence, including physical and DNA evidence and electronic monitoring data. The Investigator would interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. The PREA Coordinator (Investigator) and the Detention Manager would assist the Police Department by providing electronic monitoring data, coordinating interviews and providing background information on both the suspect and the victim. The District 1 Juvenile Detention Center would not terminate an investigation solely because the source of the allegation recants the allegation. The District 1 Juvenile Detention Center staff would not conduct compelled interviews; the Police Department would conduct those interviews. During his interviews, the Investigator (PREA Coordinator) stated that the credibility of an alleged victim, suspect, or witness would be assessed individually and would not be determined by the person's status as a resident or Staff. The Investigator stated that he would not require a resident to submit to a polygraph examination as a condition for proceeding with the investigation. Finally, the Investigator indicated all Administrative investigations: would include an effort to determine whether staff actions or failures to act contributed to the abuse; and would be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations would be documented according to the Couer d'Alene Police Department guidelines, and substantiated allegations of conduct that appear to be criminal would be referred for prosecution.</p> <p>District 1 Juvenile Detention Center retains all written reports for as long as the alleged abuser is incarcerated or employed, plus five years. The departure of the alleged abuser or victim from the employment or control of the facility would not provide a basis for terminating an investigation.</p> <p>The Auditor requested and was provided access to the last investigation conducted by the Investigator. The incident occurred in June 2018 and was investigated as staff-on-resident sexual abuse. The date of the incident was June 4, 2018. The incident was reported on June 5, 2018. The investigation began on June 5, 2018, and was concluded on June 21, 2018. The incident was reported to the Couer d'Alene Police Department on June 5, 2018. The Police Department found no evidence of a crime and determined the Resident falsely accused the Staff member. The investigation was closed as unfounded.</p> <p>The number of allegations of conduct that appeared to be criminal and were referred for prosecution since the last PREA audit is Zero.</p> <p>Policy 8.03 and interviews with the Investigator, PREA Coordinator and the Detention Manager address 115.371 (a) – (k) and (m).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.371: Criminal and administrative agency investigations.</p>

115.372	Evidentiary standard for administrative investigations
	<p data-bbox="293 134 748 161">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="293 195 488 222">Auditor Discussion</p> <p data-bbox="293 254 407 281">Documents</p> <ul data-bbox="331 327 724 354" style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act <p data-bbox="293 380 391 407">Interviews</p> <ul data-bbox="331 453 643 480" style="list-style-type: none"> • Investigator/PREA Coordinator <p data-bbox="293 560 1446 711">District 1 Juvenile Detention Center has one Investigative Officer, the Investigator who is also the PREA Coordinator, was interviewed during the audit. The Investigator indicated the evidential standard for an administrative investigation was a preponderance of the evidence. The Investigative Officer received specialized training relevant to PREA, specifically "Investigating Sexual Abuse in a Confinement Setting". Additionally, the Investigative Officer was interviewed and explained to the Auditor in detail the steps to be taken during a PREA-related investigation.</p> <p data-bbox="293 739 943 766">Policy 8.03 and the interview with the Investigator address 115.372 (a).</p> <p data-bbox="293 791 1321 819">The District 1 Juvenile Detention Center complies with Standard 115.372: Evidentiary standard for administrative.</p>

115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act <p>Residents are informed of the results of the investigation. That information includes whether the staff member is working in the resident's unit, the staff member's employment status with the Agency, the staff member has been indicted, or the staff member has been convicted. In addition, if the alleged abuser is a resident, the resident victim would be informed if the alleged abuser was indicted or convicted. All notifications are documented.</p> <p>The Auditor notes Policy 8.03, pages 9-10, indicates that the Detention Manager will notify the victim as appropriate and document the notification after a criminal investigation. The youth will be informed whether the allegation has been substantiated, unsubstantiated, or unfounded. The District 1 Juvenile Detention Center will collect relevant information from the investigating Agency to inform the youth if necessary. After an allegation of sexual abuse has been made between a youth and staff member, the District 1 Juvenile Detention Center will inform the youth whenever: the staff member is no longer employed at the facility, the Agency learns that the staff member has been indicted or convicted on a charge of sexual abuse within the facility.</p> <p>After an allegation of sexual abuse has been made between a youth and another youth, the District 1 Juvenile Detention Center will inform the youth whenever the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. All attempts to notify will be documented.</p> <p>The number of criminal or administrative investigations of alleged resident sexual abuse that the facility completed in the past 12 months is Zero.</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.373: Reporting to residents.</p>

115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • Policy 1.02 Reporting of Child Abuse/Neglect <p>The District 1 Juvenile Detention Center staff are subject to disciplinary sanctions, including termination for violating Agency sexual abuse or sexual harassment policies. Interviews with the Agency Head/Detention Manager confirm that, if necessary, appropriate sanctions are available for violations of the District 1 Juvenile Detention Center Policy relating to PREA. According to Policy 1.02, page 4, termination shall be the presumptive disciplinary sanction for Staff engaged in sexual abuse. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be 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. 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, shall be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies.</p> <p>All employees, volunteers and contractors are expected to clearly understand that the department strictly prohibits any sexual relationship with an individual under department supervision to be a serious breach of the standards of employee conduct, and these relationships will not be tolerated.</p> <p>In the past 12 months, no staff members have violated the Agency's sexual harassment policy.</p> <p>Policy 1.02, pages 3 and 4, addresses 115.376 (a) – (d).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.376: Disciplinary sanctions for Staff.</p>

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="284 178 1468 235">Auditor Discussion</p> <p data-bbox="284 235 1468 291">Documents</p> <ul data-bbox="324 315 779 357" style="list-style-type: none"> <li data-bbox="324 315 779 357">• Policy 1.02 Reporting of Child Abuse/Neglect <p data-bbox="284 420 1468 651">District 1 Juvenile Detention Center policy requires that contractors or volunteers who engage in sexual abuse or sexual harassment are reported to law enforcement and relevant licensing bodies. In these cases, contractors or volunteers who have been found to have violated District 1 Juvenile Detention Center PREA Policies are not allowed contact with residents. According to Policy 1.02, page 4, if the allegation is against a volunteer or individual not employed by the Juvenile Detention Center (Contractor), the PREA Coordinator and Director or designee will be immediately notified. The Director or designee will contact the individual's supervisor, and access to the facility will be restricted. All allegations of abuse will be referred to the CDA Police Department. The outcome of the police investigation will determine the next step in the process.</p> <p data-bbox="284 672 1468 798">All employees, volunteers and independent contractors are expected to clearly understand that the department strictly prohibits any sexual relationship with an individual under department supervision to be a serious breach of the standards of employee conduct, and these relationships will not be tolerated. Engaging in a personal or sexual relationship will terminate the contractual or volunteer status.</p> <p data-bbox="284 819 1468 882">There have been no incidents of contractors or volunteers violating District 1 Juvenile Detention Center PREA policies within the past 12 months.</p> <p data-bbox="284 903 1468 934">Policy 1.02, page 4, addresses 115.377 (a) and (b).</p> <p data-bbox="284 955 1468 987">The District 1 Juvenile Detention Center complies with Standard 115.377: Corrective action for contractors and volunteers.</p>

115.378	<p>Interventions and disciplinary sanctions for residents</p> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 1.02 Reporting of Child Abuse/Neglect <p>Interviews</p> <ul style="list-style-type: none"> • Mental Health Staff • Detention Manager • PREA Coordinator <p>Residents are subject to disciplinary sanctions following an administrative finding that the resident engaged in resident-on-resident sexual abuse or a criminal finding of resident-on-resident sexual abuse. The sanctions are commensurate with the circumstances of the abuse committed. Appropriate rights and responsibilities are afforded to the resident during the disciplinary hearing. The residents are provided the opportunity to work with Mental Health staff to correct underlying reasons or motivations for the abuse. Residents could be disciplined for sexual contact with Staff if the staff member did not consent to such contact. District 1 Juvenile Detention Center prohibits all sexual activity between residents and disciplines residents for such activity. District 1 Juvenile Detention Center prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence enough to substantiate the allegation. The Agency prohibits all sexual activity between residents and disciplines residents for such activity; the Agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.</p> <p>Based on a discussion with the PREA Coordinator and the Detention Manager, the Auditor was satisfied that there is no use of isolation at District 1 Juvenile Detention Center. Specifically, at District 1 Juvenile Detention Center, there are three single-cell housing units. Residents can be kept separate and still participate in daily activities without being confined to their cells. The residents are provided the opportunity to work with mental health staff to correct underlying reasons or motivations for the abuse. During her interview, the Mental Health staff member indicated that the facility could not offer therapy to possible perpetrators because the residents had not been adjudicated. However, once adjudicated, if the resident is housed at this facility, attempts would be made to connect the resident with community programs that address the underlying reasons for sexual abuse.</p> <p>There have been no reported sexual abuse or harassment among District 1 Juvenile Detention Center residents in the past 12 months.</p> <p>Policy 8.03 Prison Rape Elimination Act page 10 and Policy 1.02 Reporting of Child Abuse/Neglect address 115.378 (a)-(g).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.378: Interventions and Disciplinary sanctions for residents.</p>
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115.381	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 14.03 Medical Manual <p>Interviews</p> <ul style="list-style-type: none"> • Mental Health staff • Medical Staff <p>The District 1 Juvenile Detention Center provides a follow-up meeting with a medical and mental health practitioner for residents who disclose any prior sexual victimization during screening. Residents who have previously perpetrated sexual abuse are offered a follow-up meeting with a Mental Health practitioner.</p> <p>The Mental Health staff member indicated during her interview that sexual predators are offered treatment at the facility, and if necessary, appropriate arrangements are made for assistance in the community. Treatment plans and information related to sexual victimization or abuse are limited to mental health practitioners as necessary. Appropriate rules concerning private medical information are strictly enforced. Residents are made aware of the reporting requirements and what is considered protected information.</p> <p>Medical and Mental Health staff work together to collect and monitor information that indicates prior sexual victimization. In addition, if the resident reports being a predator, that information is appropriately documented. Follow-up by Mental Health staff and re-assessment is provided as needed. This follow-up occurs within 14 days of intake. Any information pertaining to victimization or predatory behavior is limited to a need-to-know basis. Classification and Custodial Staff are informed for security and housing. Interviews with Staff confirm compliance with this standard.</p> <p>The Medical staff member indicated during her interview that information related to sexual victimization or abusiveness is provided only to Staff who need to know and is shared in a way that allows for good decision-making. Appropriate Child Protective Agencies would be notified about prior sexual victimization. Relevant information is used to inform mental health treatment plans and security decisions, such as housing, education, and program assignments. Medical clinical notes are maintained separately from the resident files.</p> <p>Policy 8.03, page 11, Policy 14.07, pages 4-7, and interviews with Medical and Mental Health staff address 115.381 (a) (b) (c) and (d).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.381: Medical and mental health screenings; history of sexual abuse.</p>

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 14.03 Medical Manual • District 1 JDC Response to a Sexual Assault/Abuse Incident Checklist <p>Interviews</p> <ul style="list-style-type: none"> • Mental Health staff • Medical Staff <p>Medical and Mental Health Staff provide access to emergency treatment as necessary. Upon notification, Medical and Mental Health staff determine a course of action based on their professional judgment. Treatment is timely and in accordance with professionally accepted standards. Treatment is provided without cost, regardless of the cooperation level of the victim. Interviews with Medical Staff confirm adherence to this standard.</p> <p>The District 1 Juvenile Detention Center procedure states that residents would be taken or referred to Kootenai Health for unimpeded access to emergency medical treatment and crisis intervention services. The Kootenai Health sexual assault protocol makes it possible for victims of sexual assault to receive prompt and compassionate emergency care from medical professionals who understand victimization and streamline the examination time and the medical evidence-gathering process.</p> <p>Safe Passage Violence Prevention Center offers Mental Health care, and their Advocate would be at the hospital with the resident victim. Treatment for these services is at no cost to the resident. Access to information about emergency contraception and sexually transmitted infections prophylaxis would be provided by Medical Staff at the hospital and followed up by Medical Staff at the District 1 Juvenile Detention Center.</p> <p>Policy 8.03, page 10, indicates that treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Policy 8.03 and interviews with Medical Staff address 115.382 (a), (b), (c) and (d).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.382: Access to emergency medical and mental health services.</p>

115.383	<p data-bbox="284 65 1466 121">Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p data-bbox="284 121 1466 178">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="284 178 1466 235">Auditor Discussion</p> <p data-bbox="284 235 1466 291">Documents</p> <ul data-bbox="324 315 1006 451" style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Policy 14.03 Medical Manual • District 1 JDC Response to a Sexual Assault/Abuse Incident Checklist • MOU Safe Passage <p data-bbox="284 462 1466 518">Interviews</p> <ul data-bbox="324 535 535 609" style="list-style-type: none"> • Mental Health staff • Medical Staff <p data-bbox="284 619 1466 724">The District 1 Juvenile Detention Center provides medical and mental health treatment to all residents who have reported sexual victimization. Upon release, residents treated by Mental Health staff are provided with information and the opportunity to meet with Community Mental Health staff.</p> <p data-bbox="284 735 1466 934">Female victims of sexually abusive vaginal penetration would be offered a pregnancy test. There have been zero cases involving vaginal penetration at the District 1 Juvenile Detention Center in the previous 12 months. Sexual abuse victims are provided the opportunity to undergo tests for sexually transmitted diseases. The testing and treatment of sexually transmitted diseases are provided to all residents. A resident does not need to be a victim of sexual abuse to have access to medical treatment for a sexually transmitted disease. There is no cost to the victim for the services provided by Medical and Mental Health Staff. Interviews conducted with Medical and Mental Health staff confirm compliance with this standard.</p> <p data-bbox="284 945 1466 1113">The District 1 Juvenile Detention Center provides ongoing medical and mental health care for sexual abuse victims and abusers. Appropriate follow-up services, treatment plans and continuing care upon release from custody are available. All treatment is provided by facility staff or community providers. If necessary, pregnancy tests and follow-up care would be provided. Appropriate STD tests, as medically indicated, would be provided. There would be no cost to the resident for this care.</p> <p data-bbox="284 1123 1466 1228">The District 1 Juvenile Detention Center offers a mental health evaluation for abusers and treatment when deemed appropriate by a Mental Health practitioner. Interviews with Medical and Mental Health staff confirm compliance with this standard.</p> <p data-bbox="284 1239 1466 1312">Medical Staff indicated they would offer appropriate treatment services to residents victimized by sexual abuse, including but not limited to tests and education about pregnancy and sexually transmitted diseases.</p> <p data-bbox="284 1323 1466 1375">Policy 8.03, page 11, and interviews with Medical and Mental Health Staff address 115.383 (a) - (h).</p> <p data-bbox="284 1386 1466 1463">The District 1 Juvenile Detention Center complies with Standard 115.383: Ongoing medical and mental health care for sexual abuse victims and abusers.</p>
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115.386	<p>Sexual abuse incident reviews</p> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act <p>Interviews</p> <ul style="list-style-type: none"> • Incident review team <p>The District 1 Juvenile Detention Center staff would review the final investigative report at the end of the investigative process. The review would be scheduled within 30 days of the conclusion of the investigation. The review team consists of the Detention Manager, the PREA Coordinator and relevant Staff involved in the investigation. The review team would determine if a change in procedure was necessary if it was motivated by any class affiliation, sexual orientation, or other group dynamics. A review of the monitoring technology would be conducted to assess its effectiveness. The physical barriers of the facility and the staffing pattern would also be evaluated. There would be a final report of the incident with appropriate recommendations.</p> <p>Policy 8.03, page 12, indicates the review shall be conducted at the end of each investigation. The review should include upper management, with input from supervisors, investigators, and medical or mental health staff. The review shall address: if changes are needed to Policy and Procedures; Examine areas of the facility to see if changes can be made to reduce risk; Review safety and monitoring practices; Determine if additional training is needed and determine if the event was motivated by race, ethnicity, gender, or sexual preference.</p> <p>In the past 12 months, the number of criminal or administrative investigations of alleged sexual abuse completed at the facility, followed by a sexual abuse incident review within 30 days, is zero.</p> <p>Policy 8.03, page 12, addresses 115.386 (a)-(e).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.386: Sexual abuse incident reviews.</p>
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115.387	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ul style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Survey of Sexual Victimization, 2020 Locally or Privately-Operated Juvenile Facilities • 2022 Annual Review Directors Letter and aggregated data (https://www.kcgov.us/353/Report-Abuse) <p>Uniform data is collected that accurately tracks allegations of sexual abuse. The data is aggregated annually. The PREA Coordinator is responsible for collecting the data necessary to answer all questions from the U.S. Department of Justice Bureau of Justice Statistics Survey of Sexual Violence. The Auditor reviewed the 2020 Survey of Sexual Victimization for the District 1 Juvenile Detention Center. The 2022 annual review is posted online and contains a review of the aggregated data from 2019, 2020 and 2021. (https://www.kcgov.us/353/Report-Abuse).</p> <p>Policy 8.03, pages 12-13, the SSV 2020 and the 2022 Annual Review address 115.387 (a) – (f).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.387: Data collection.</p>

115.388	Data review for corrective action
	<p data-bbox="293 134 748 161">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="293 195 488 222">Auditor Discussion</p> <p data-bbox="293 254 407 281">Documents</p> <ul data-bbox="334 327 1273 420" style="list-style-type: none"> • Policy 8.03 Prison Rape Elimination Act • Survey of Sexual Victimization, 2020 Locally or Privately-Operated Juvenile Facilities • 2022 Annual Review Directors Letter and aggregated data (https://www.kcgov.us/353/Report-Abuse) <p data-bbox="293 443 1422 562">The District 1 Juvenile Detention Center PREA Coordinator and the Detention Manager review the reported sexual abuse and harassment incidents to identify problem areas and make recommendations for improvement. Policy changes are implemented to improve the District 1 Juvenile Detention Center's commitment to the PREA. A copy of the report is made available to the Public online at https://www.kcgov.us/353/Report-Abuse.</p> <p data-bbox="293 590 1175 617">Policy 8.03, pages 12-13, the SSV 2020 and the 2022 Annual Review address 115.388 (a) – (d).</p> <p data-bbox="293 644 1273 672">The District 1 Juvenile Detention Center complies with Standard 115.388: Data review for corrective action.</p>

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Data is strictly controlled by the District 1 Juvenile Detention Center PREA Coordinator. The PREA Coordinator and the Detention Manager have the authority to view the files and data. The data provided to the Public does not contain any personal identifiers. District 1 Juvenile Detention Center maintains this data for ten years after the initial collection date.</p> <p>Policy 8.03, page13,addresses 115.389 (a) – (d).</p> <p>The District 1 Juvenile Detention Center complies with Standard 115.89: Data storage, publication, and destruction.</p>

115.401	Frequency and scope of audits
	<p data-bbox="293 134 748 161">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="293 195 488 222">Auditor Discussion</p> <p data-bbox="293 252 1360 279">This is District 1 Juvenile Detention Center's third PREA audit. The initial PREA Audit was conducted in April 2016.</p> <p data-bbox="293 306 740 333">Kootenai County District 1 has only one facility.</p> <p data-bbox="293 361 1448 449">The District 1 Juvenile Detention Center participated in a PREA Audit in April 2016 and April 2019, and this audit (August 2022). During the three years, starting on August 20, 2013, and every three years after that, the District 1 Juvenile Detention Center has ensured a PREA Audit was completed.</p> <p data-bbox="293 476 1451 659">The Auditor reviewed the relevant policies, the District 1 Juvenile Detention Center procedures, reports, and accreditations. The Auditor was provided a sampling of relevant documents for the most recent one-year period. The Auditor was permitted access to and observed all the District 1 Juvenile Detention Center areas. The Auditor was permitted to request and receive copies of all relevant documents. The Auditor interviewed Staff, supervisors, and administrators. The Auditor was permitted to conduct private interviews with residents. Residents were allowed to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>This is District 1 Juvenile Detention Center's third PREA audit. The previous audit was conducted April 14-16, 2019. Upon completing the final report in 2019, the District 1 Juvenile Detention Center published the audit results on its website. This task was completed within 90 days of the completion of the audit.</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 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.312 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	na

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

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

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

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

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

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

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

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

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

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

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

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

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

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

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

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.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
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.)	na
	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.)	na
	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.)	na
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.)	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na

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.)	na
	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.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	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.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
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.)	na
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?	yes
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?	no
115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes

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

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

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

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

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

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

115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes