

PREA Facility Audit Report: Final

Name of Facility: Carroll County House of Corrections & Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/06/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Jack Fitzgerald	Date of Signature: 11/06/2025

AUDITOR INFORMATION

Auditor name:	Fitzgerald, Jack
Email:	jffitzgerald@snet.net
Start Date of On-Site Audit:	09/10/2025
End Date of On-Site Audit:	09/12/2025

FACILITY INFORMATION

Facility name:	Carroll County House of Corrections & Jail
Facility physical address:	County Complex Building 2, Ossipee, New Hampshire - 03864
Facility mailing address:	50 County Farm Road, Ossipee, New Hampshire - 03864

Primary Contact

Name:	Michael Baker
Email Address:	mbaker@carrollcountynh.gov
Telephone Number:	6035392282

Warden/Jail Administrator/Sheriff/Director

Name:	Brian King
Email Address:	bking@carrollcountynh.gov
Telephone Number:	6035392282

Facility PREA Compliance Manager

Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site

Name:	Jennifer Coigley
Email Address:	jcoigley@carrollcountynh.cc
Telephone Number:	6035392282

Facility Characteristics

Designed facility capacity:	73
Current population of facility:	64
Average daily population for the past 12 months:	57
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-99
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	35
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	8
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	8

AGENCY INFORMATION	
Name of agency:	Carroll County Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	50 County Farm Road, Ossipee, New Hampshire - 03864
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Mike Baker	Email Address:	mbaker@carrollcountynh.gov
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Facility AUDIT FINDINGS

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:

0	
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Number of standards met:

45	
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Number of standards not met:

0	
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POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-09-10
2. End date of the onsite portion of the audit:	2025-09-12

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:	The Auditor spoke with two regional hospitals to get an understanding of the ability to have victims seen for forensic exam and appropriate follow-up care. The Auditor also spoke with the local victim advocacy agency for sexual and domestic violence in New Hampshire. The Auditor made calls to outside reporting options to confirm the numbers listed in the facility and the ability for them to receive a call. The Auditor also completed web searches for information on the facility, including news stories. Research was also completed on the SANE Certification process, the State protocol for the treatment of sexual abuse victims, including the law enforcement interaction, and ensuring that services are available without cost.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	73
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15. Average daily population for the past 12 months:	64
16. Number of inmate/resident/detainee housing units:	7
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	62
25. 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:	1
26. 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:	5
27. 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

<p>28. 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:</p>	1
<p>29. 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:</p>	2
<p>30. 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:</p>	1
<p>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	0
<p>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	0
<p>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	4
<p>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	0

<p>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
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Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

<p>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>35</p>
<p>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>8</p>
<p>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>8</p>
<p>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>9</p>
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<p>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input checked="" type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The facility was asked in advance to be prepared to provide a list of targeted individuals by the definitions used in the audit tool. They were also asked to provide a list of the population by unit, so I could ensure the sample was diverse from throughout the facility, and to ensure prohibited practices such as housing all LGBTIQ+ individuals together did not exist. After identifying the target population, the Auditor used the housing assignment sheets and random numbers to select the remaining individuals from each housing unit. The Auditor also ensured that female residents were interviewed.</p>
<p>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>44. 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):</p>	<p>No text provided.</p>

Targeted Inmate/Resident/Detainee Interviews

45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	8
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".	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<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. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	There were two inmates in the population identified with physical disabilities. One is counted in another category, while a second individual was picked for an interview on day one, but was released to the state prison before it could occur.

<p>48. 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>2</p>
<p>49. 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 reported that no individuals were blind or had significant visual impairment. The Auditor confirmed with medical how this population would be served and discussed with intake staff how they would ensure the inmate had an understanding of the zero-tolerance policy toward sexual abuse and how to report a concern.</p>
<p>50. 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>1</p>
<p>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>

<p>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor spoke with an identified LGBTQI+ population member who did not identify to the auditor as transgender or intersex. The individual described their status as simply queer. They were interviewed about their perceptions of the intake process, feelings of safety, housing, and search and access to support. this individual was counted in the LGB interview.</p>
<p>54. 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>None of the individuals who had previously lodged complaints were in the current population to interview.</p>
<p>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>56. 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 Alleged to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility does not use involuntary segregation as a mechanism to protect victims or potential victims of sexual abuse. The Auditor spoke with staff working in the high security unit and with supervisors, who confirmed that the practice is to isolate the aggressor, not the victim.</p>

<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<h3>Staff, Volunteer, and Contractor Interviews</h3>	
<h4>Random Staff Interviews</h4>	
<p>58. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>59. 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 checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None</p>
<p>60. 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>61. 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 Auditor interviewed individuals from all shifts and in different roles in the environment, including custody and noncustodial positions. The Auditor also interacted with staff informally and asked questions on the initial tour of staff about training, procedures, and practices that may impact a compliance determination. These individuals may not have had formal interviews but were able to demonstrate how supervisor rounds are documented, how procedures for inmates to report a concern are documented, and how cross-gender announcements are made and documented.</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.

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	12
63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <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)

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

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

	<input type="checkbox"/> Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
69. 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 type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other

<p>70. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>Carroll County has a smaller staff than larger prisons; as a result, the facility does have people with multiple duties, which is reflected in the number of individuals interviewed vs the specialized questions that were answered.</p>
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<p>71. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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Was the site review an active, inquiring process that included the following:

<p>72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>

<p>75. Informal conversations with staff during the site review (encouraged, not required)?</p>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<p>76. 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 able to interact informally with staff and inmates during the tour and at other points outside the formal interview room. The Auditor tested the functionality of critical reporting methods in the housing units, confirmed the accuracy of posted materials, and verified the privacy of inmate mail to professional agencies. Inmates assisted in showing, in addition to posted materials, how they can access information on the tablet. These individuals also explained how phone calls can be made from the tablet or the unit phones, and how the tablets can allow messages/requests/ or grievances to be made electronically or on paper.</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>77. 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>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

The Auditor selected a sample of current inmate files to review for screening and education on the Prison Rape Elimination Act. The Auditor reviewed the timeliness of initial and 30-day reviews. The Auditor also looked for referral to mental health if the individual had a past abuse history. The Auditor also selected a series of staff, including those hired in the last year, promoted, and those employed with the DOC for more than five years. The Auditor also looked for prior institutional employment checks that had been completed. The Auditor reviewed a sample of volunteers and contractors to ensure screening and education were provided to them.

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.

79. 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	2	0	2	0
Staff-on-inmate sexual abuse	2	0	2	0
Total	4	0	4	0

80. 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.

81. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	2	0	0
Staff-on-inmate sexual abuse	0	2	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.

83. 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

84. 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

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

4

<p>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><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)</p>
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Inmate-on-inmate sexual abuse investigation files

<p>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>

Staff-on-inmate sexual abuse investigation files

<p>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><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)</p>
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Sexual Harassment Investigation Files Selected for Review

<p>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>There were no reported allegations of sexual harassment by staff or inmates in the past year.</p>
<p>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><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)</p>

Inmate-on-inmate sexual harassment investigation files

<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The facility had limited allegations, and they were all unfounded. No individuals who had reported past abuse were in the population, but random inmates interviewed supported that the facility is safe from sexual abuse and that they believe the facility would investigate any allegation, including third-party complaints.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

Yes

No

Non-certified Support Staff

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

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

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

Standards

Auditor Overall Determination Definitions

- Exceeds Standard
(Substantially exceeds requirement of standard)
- Meets Standard
(substantial compliance; complies in all material ways with the standard 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.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200 Sexual Assault Prison Rape Elimination Act Policy 7-C-103 Administration and Management Carroll County Department of Corrections Organizational Chart Individuals interviewed/ observations made. Interview with PREA Coordinator Interview with Superintendent

Observations made

Random Inmate

Random Staff

Summary Determination

Indicator (a) The Carroll County Department of Corrections has developed agency-wide policies to prohibit sexual abuse and harassment. The agency's Sexual Harassment policy 7-C-103 ensures compliance with the Prison Rape Elimination Act. Policy 4-D-200 Sexual Assault Prison Rape Elimination Act was written to address the various requirements of the standards. The 42-page policy set forth a zero-tolerance expectation for any sexual misconduct by inmates, staff, contractors, or volunteers. In the policy statement, the agency's expectation is set forth. "The goal of this policy is to ensure: all staff work to prevent sexual abuse and sexual harassment of inmates in keeping with the intent of the federal PREA statute; Health services are provided to all inmates and detainees in a professionally acceptable manner; and staff are qualified, adequately trained, and able to demonstrate competency in their assigned duties, specifically in this case, as those duties relate to the Prison Rape Elimination Act." The policy further defines zero tolerance when it states, "CCDOC is committed to a zero- tolerance standard for sexual abuse and sexual harassment of inmates within the CCDOC, including abuse and/or sexual harassment by inmates on another inmate(s), by staff on an inmate/s, and/or by any other person working with or having contact with inmates in the Facility or under the Facility's control or supervision. This policy makes the prevention of inmate-on-inmate sexual assault and staff sexual misconduct a top priority. Facility staff will immediately respond to, investigate, and support the prosecution of sexual assault, victimization, and misconduct through both internal and external processes, in partnership with State Police, local law enforcement, County prosecutors, and the N.H. Office of the Attorney General." The subsequent pages of the policy further define the different aspects of CCDOC's efforts to prevent, detect, and respond to incidents of sexual abuse. It identifies screening, education, monitoring, and other elements that support prevention, allowing for detection, and ensuring a comprehensive legal and medical response to any complaint.

This is the second PREA audit of the Carroll County Jail. Staff of the Carroll County Department of Corrections (CCDOC) showed knowledge consistent with training materials about their role in preventing, detecting, and responding to sexual assault claims. The Auditor found that both staff and inmates know there are consequences for any form of sexual misconduct. Staff were asked to define in their own words what zero tolerance toward sexual abuse, harassment, or retaliation means and how their duties help to create that culture. The Auditor observed that posters throughout the facility remind inmates and staff of the zero-tolerance expectation. The Auditor also had inmates show them how to access PREA Information on the inmate tablets and

the visitation kiosk on the units. Random Inmates spoken with, both formally and informally, reported that the Carroll County Department of Corrections facility is a PREA safe environment and supports a zero-tolerance culture. Staff complete frequent visits to the units where there is no direct supervision. Inmates also confirmed access to supervisory staff during the day and can write the Superintendent.

Indicator (b). The Carroll County Department of Corrections has only one facility for individuals awaiting trial or placement post-sentencing. As noted, in addition to holding individuals who have committed crimes in New Hampshire, the PREA Policy 4-D-200 Sexual Assault Prison Rape Elimination Act defines the role of the PREA Coordinator. "PREA Coordinator(s), or their designees, responsible for developing, implementing, and overseeing compliance of the Facility with PREA standards and Facility PREA policies." The policy and interview defined the duties of the PREA Coordinator to include coordinating and developing procedures for identifying, monitoring, and tracking incidents of sexual misconduct and retaliation occurring within the CCDOC. The PREA Coordinator is a Captain recognized within the agency's organizational chart, reporting to the Superintendent and Deputy Superintendent. This chart shows the structure of responsibilities within the environment. Interviews with the PREA Coordinator and Superintendent confirmed that he has sufficient access to key agency administrators to influence policy and resources, ensuring a PREA-safe environment. The Auditor also observed the routine interactions between upper management staff. The Superintendent reports that there is basically daily interactions between all members of the management team.

Indicator (c) The indicator is not required as the Carroll County Department of Corrections only has one facility.

Compliance Determination

The Carroll County Department of Corrections has policies that support compliance by defining the steps to prevent, detect, and respond to sexual abuse and sexual harassment incidents. The agency's PREA policy addresses prohibited behaviors and sanctions for any form of sexual misconduct. The Auditor's review of other agency policies further supports the zero-tolerance expectation as well as a system of prevention, detection, and response to critical incidents like a sexual abuse incident. The policy and other documents provided to the Auditor define the roles of the PREA Coordinator. The interview with the agency PREA Coordinator confirmed his role to ensure PREA Compliance is maintained. The PREA Coordinator believes he has the capacity to advocate for policy or procedural changes needed to support inmate safety. This was confirmed with the Superintendent of CCDOC. Interaction with staff at various levels within the organization reinforces the importance of the PREA Coordinator and the agency's commitment to maintaining a zero-tolerance culture.

	Compliance is based on interviews with staff, leadership, the documentation provided, and policy. The Auditor also considered the interviews and observed interactions between the PREA Coordinator and inmates, which supported access to the PREA Coordinator.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Contracts with two counties and the NH DOC.</p> <p>Individuals interviewed/ observations made. Superintendent</p> <p>PREA Coordinator</p>
	<p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections does not contract for the holding of its inmates at any other institution. The facility is a contractor that can receive female inmates from two different counties in New Hampshire and can receive keep separate female inmates from the New Hampshire Department of Corrections. Currently, the facility has agreements with the three agencies to house female inmates at Carroll County. The agency will work with other counties in mutual aid situations. Mutual Aid movements are not formalized through contractual processes, as they are not routine and often for brief periods, which differs from the identified situations above. The Superintendent and the PREA Coordinator agreed that when moving a Carroll County inmate out, they will look to use a facility that is compliant with the Prison Rape Elimination Act (PREA).</p>

Indicator (b) Carroll County Department of Corrections does not contract for the holding of inmates at any other institution. The CCDOC has policy language in place in case it decides to contract out beds in the future. Policy 4 D 200 states, "In order to ensure compliance with PREA 115.12, Contracting with other entities for the confinement of inmates, CCDOC will ensure that any contracts for the confinement of inmates with private agencies or other entities, including other government agencies, shall include the entity's obligation to adopt and comply with the PREA standards, and allow for CCDOC contract monitoring to ensure that the contractor is complying with the PREA standards." County Jails in New Hampshire provide mutual aid when high-profile or court-ordered separated individuals are transferred to other jails. Jail Administrators will authorize these moves and meet monthly, where any concerns would be discussed. The PREA Coordinator is confident that they would be made aware of any allegation involving their inmate house at another facility as part of a mutual aid transfer. The Superintendent confirmed that all of the state jail administrators meet monthly, so he would have some knowledge about the facility's operational status before sending an inmate.

Compliance Determination

The Carroll County Department of Corrections does not currently contract with other entities to provide for the confinement of its inmates. Compliance is based on the fact that the current indicators do not apply. The Auditor also notes that policy is in place and the Superintendent and PREA Coordinator are aware of any future contracting requirements related to this standard. The contract to provide bed space to the New Hampshire DOC had language requiring Carroll County to comply with the Prison Rape Elimination Act.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200 Prison Rape Elimination Act Supervisor Rounds Staffing plan document (includes both staffing and monitoring technology) Target population Investigation Data totals

Individuals Interviewed/ Observations Made.

PREA Coordinator

Lieutenant

Supervisory Staff (Sgts.)

Observation on tour of logbooks and Supervisory movement onsite

Interview with control officers

Interview with Inmates

Summary Determination

Indicator (a) Carroll County Department of Corrections (CCDOC) PREA Policy 4-D-200 sets forth the requirements of an annual review of staffing and video needs. Page 3 of the policy states, "In compliance with PREA Standard 115.13, the Superintendent or his designee shall ensure that CCDOC complies with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against sexual abuse." The annual review analysis is completed for the Superintendent, Major, Captain who serves as the PREA Coordinator, and the Lieutenant who serves as the investigator and classification supervisor. The Auditor reviewed with the Superintendent the items he considers part of this process, including past PREA incidents and other safety issues that have arisen in the year. The Carroll County Department of Corrections is reportedly not under any judgment of inadequacy related to staffing. The superintendent also discussed how monitoring technology and cameras complement the staffing plan. The Superintendent confirmed that there were no findings of inadequacies by judicial, federal, or oversight bodies. He also confirmed the facility has not operated under the minimal staffing level, and he receives a daily report that tracks the staffing allotment. The facility is able to adjust post assignments to ensure required posts are maintained.

The staffing plan is based on 73 inmates housed by maximum, medium, and minimum classification levels. Over the past year, the facility has reportedly averaged just over 57 inmates. There were 62 inmates on day one of the site visit. The CCDOC provided the Auditor with many elements in advance that supported compliance. The facility was asked to upload the PowerPoint document, which provides information in narrative form with visual aids covering all the elements described in this indicator. Discussions with the Superintendent described how he presents his budget and staffing needs to the county annually. The PREA Coordinator, along with the entire CCDOC management team, developed a comprehensive 17-page document that addresses all aspects of this indicator.

Indicator (b). The indicator is N/A, as CCDOC has reportedly complied with the staffing plan in the past three years. The staffing plan for the Carroll County Department of Corrections allows the management to adjust the deployment of staff as needed and in response to critical positions. When staff call out, there is an ability to mandate staff to ensure the overall safety of inmates. Interviews support the Superintendent, Major, or Captain, who would be notified of all critical events, including any situation that impacts staffing minimums. The Sergeants who oversee operations are responsible for finding coverage and documenting the changes, as well as justifying why minimums were not met. Inmates' support staff are available to them and did not voice a concern about a lack of staffing at any time. All fixed post positions must be filled and documented in the facility logs. The staffing plan defines the minimum staffing requirements for each shift. Policy 4-D-200 addresses the expectation of this indicator, stating, "When the Facility does not comply with its staffing plan, the Superintendent, or his/her designee, will document and delineate the reasons for non-compliance."

Indicator (c) In Policy 4-D-200, the Carroll County Department of Corrections has set forth an annual review of the staffing of the Jail. "Whenever the Superintendent deems it necessary, but no less frequently than annually, he/she - in consultation with the PREA Coordinator - will assess, determine if necessary, and document whether adjustments in the Facility's staffing plan, the effectiveness of its video monitoring systems. If the Superintendent determines that a substantial modification of the Facility's infrastructure is necessary, or that the Facility's video monitoring technology needs updating or enhanced, he/she - in consultation with the PREA Coordinator - will consider how such modifications might enhance the Department's ability to protect inmates from sexual abuse." The PREA Coordinator confirmed that administration routinely reviews the staffing and technology needs of the facility. This does occur annually, reportedly, but is also part of their conversations after any critical incidents. The Auditor was able to observe staffing locations and the movement of supervisory staff during the three-day site visit.

Indicator (d) CCDOC has policy language and current practice that support this indicator. The Policy states, "In further compliance with PREA 115.13, supervisory staff shall conduct and document unannounced rounds on all shifts. (See CCDOC Policy and Procedure 2-A-109). Unless an announcement of supervisory rounds are related to a legitimate operational function of the Facility, staff are prohibited from alerting other staff members that supervisory rounds are occurring." The Auditor was provided with documentation supporting the fact that routine, unannounced rounds are conducted by supervisory staff. The Auditor requested and was provided with documentation from both the electronic logs and the video system, supporting the fact that sergeants perform unannounced rounds of the facility. Supervisors, spoken with both formally and informally, report that they stagger their tours and change the

order of units they visit to further ensure that both staff and inmates are unaware of when they will return. The rounds are recorded into the PIPE, an electronic rounds tracker. The Auditor reviewed the video on site and asked for, and was provided, video stills to support the rounds documentation. The Auditor also asked the Control Officer if he informs individuals when the Supervisors are making tours. This staff member reported that they are prohibited from alerting other staff members that these supervisory rounds are occurring unless such an announcement is related to the needs of the facility. Line staff spoken with during the course of the audit supported that random tours were completed. The Auditor also confirmed with inmates that supervisory staff are available for them to speak as they tour the area.

Compliance Determination

The Carroll County Department of Corrections has policies and practices in place that address the requirements of the four indicators in this standard. The CCDOC has developed a narrative plan that addresses the various considerations in indicator (a). The plan is reflective of information provided in other written forms and information obtained in interviews. Data on at-risk populations and the frequency of PREA allegations support an understanding of the agency in plan development.

The facility utilizes cameras, electronic rounds tracking tools, and active supervision of inmates through frequent tours to ensure the safety of inmates. Sergeants conduct complete tours of the entire complex at a minimum of twice per shift, unannounced. The standard is found to be compliant based on the information provided and observations made while at the facility.

Interviews with the Superintendent, Captain, and Sergeants support an understanding of the standards elements and a consistent practice within their policies. Formal and informal interviews with inmates are supported by staff, including supervisors, who are always available. The Auditor also took into consideration the staffing plan that was developed, which is in line with the stated practices in place and the commitment of the management team (Superintendent, Major, Captain, and Lieutenant). Compliance is based on policies and procedures, the interviews completed, and the documentation supporting sufficient staffing and supervision to prevent incidents of sexual misconduct.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policies and written/electronic documentation reviewed.

Carroll County Department of Corrections Pre-Audit Questionnaire

Policy 4-D-200 Prison Rape Elimination Act

New Hampshire Department of Health and Human Services Website New Hampshire statutes 169-B2

Individuals interviewed/ observations made.

Interview with PREA Coordinator

Interview with Intake staff

Summary Determination

Indicator (a) The Carroll County Department of Corrections would not detain juveniles arrested under the age of 18. The state of New Hampshire requires juveniles to be held in a state facility under the direction of the Department of Health and Human Services.

Indicator (b) The Carroll County Department of Corrections would not detain juveniles arrested under the age of 18. The state of New Hampshire requires juveniles to be held in a state facility under the direction of the Department of Health and Human Services.

Indicator (c) The Carroll County Department of Corrections would not detain juveniles arrested under the age of 18. The state of New Hampshire requires juveniles to be held in a state facility under the direction of the Department of Health and Human Services.

Compliance Determination

The standard is compliant. None of the indicators currently apply. As stated, the Carroll County Department of Corrections does not house youthful inmates (individuals under 18). In New Hampshire, all youth under 18 who require secure detention would be housed at a Department of Health and Human Services facility in Manchester, NH. As such, there were no individuals with whom the Auditor could interview about sight and sound separation issues or housing or programming issues. The Auditor confirmed the lack of juveniles through direct observation on the tour, the client population sheet, and through interviews with the PREA Coordinator and Intake

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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 2-C-100 Searches Search</p> <p>training materials</p>
	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>Random Staff</p> <p>Random Inmates</p>
	<p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction Search Policy 2-C-100 Searches prohibits cross-gender strip searches, or as the policy calls them unclothed searches, of inmates except in emergency situations. The policy states, "the Facility policy requires that all cross-gender strip searches (referenced in this Facility policy as Unclothed Searches) be documented. As in the Clothed Search of all other inmates, an Unclothed Search of opposite gender inmates will only be conducted in exigent circumstances." Agency policy further clarifies the prohibitions on body cavity searches except in exigent circumstances. It states, "The Facility shall not conduct</p>

cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances. Such searches must be performed by medical practitioners." Policy language is very specific on the required conditions to have an inmate undergo a body cavity search.

"1. Manual or instrument inspection of body cavities, other than searches of the mouth, nose, and ears, will be conducted as follows:

a. when authorized by the Superintendent or his designee, when there is reasonable suspicion to believe an inmate is concealing contraband or evidence of a crime inside their body cavity;

b. pursuant to a warrant issued upon probable cause. The warrant may be dispensed with in cases of consent or exigent circumstances. Such exigency must be reasonable and demonstrable;

c. be conducted by a licensed physician or registered nurse of the same sex as the inmate searched, and in the presence of only the number of staff required who are of the same sex as the inmate to be searched and deemed necessary, to witness the removal of contraband and to maintain security.

d. Body cavity searches will be fully documented on the Inmate Unclothed Search Documentation Form, including justification for the search and whether contraband was or was not found."

The facility reports it has not had any cross-gender strip searches or any body cavity searches in the past year.

Indicator (b) Search policy 2-C-100 prohibits cross-gender pat searches of female inmates and states, in the event of an exigent circumstance requiring an opposite gender pat search, the staff is required to complete an incident report stating the reason justifying why the action occurred. Page 5 of the Policy includes language consistent with the standard on pat-down searches and females' access to programming, which is not contingent on female staffing. "In accordance with PREA, cross-gender pat-down searches of female inmates, absent exigent circumstances, are prohibited. The Facility requires that all cross-gender pat-down searches of female inmates be conducted only after exigent circumstances have been established. All such searches will be documented." Interviews with staff and inmates support that there are no cross-gender pat searches of female inmates. The female inmates interviewed support the fact that there are no prohibitions on movement between the unit and programming due to the lack of female staffing. The agency maintains a female staff on each shift and reports no instances of cross-gender searches. Inmates and staff spoken with also report that there were no instances where female inmates were not allowed to attend programming due to a lack of female officers available. Policy language at Carroll County also ensures that cross-gender pat searches of male inmates are only conducted in exigent circumstances and with the approval of a supervisor. "In emergency situations, cross gender pat-down searches may be

conducted on male inmates if a male officer of the same gender is not available, and only after obtaining permission from the shift supervisor. Furthermore, the pat-down search described here must be conducted in the presence of the shift supervisor. An incident report containing the exigent need(s) to conduct such a search will be forwarded to the Superintendent or his designee."

Indicator (c) Search Policy 2-C-100, as noted in indicators (a) and (b), requires the documentation of all exigent circumstances. There was no documentation to review as there had been no cross-gender strip, body cavity searches, or pat searches.

Indicator (d) CCDOC PREA Policy 4-D-200 covers the expectation of this indicator and provides operational expectations across the institution. The facility has policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Its policy states, "Inmates will be allowed 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/housing area checks. Staff of the opposite gender will announce their presence when entering any inmate housing unit at CCDOC."

The Auditor also observed staff announcements on the tour and confirmed with inmates their ability to shower or use restroom facilities without being seen by staff of the opposite gender. No Inmates reported ever being naked in front of opposite-gender staff. The Auditor spoke with the agency about the privacy in observation cells in intake and medical areas. The Superintendent had the portion of the cell obscured to ensure toileting could occur with a level of privacy. The solution was in place by the second day of the audit. The Auditor also raised concerns about a dormitory unit where the opposite gender could potentially see individuals at a urinal. The facility frosted the windows within one day. The facility also ordered wider shower curtains to ensure they cover wall to wall, lessening the likelihood of cross gender viewing by staff.

Indicator (e) The Carroll County Department of Correction has policy language that addresses the expected practices for searching transgender or intersex inmates. Search policy 2-C-100 sets forth the requirement that transgender individuals are not searched for the purpose of determining genital status. "As indicated in paragraph V. A. 4 above, searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status is prohibited." Intake staff knew that strip searches for the purpose of identifying genital

status are inappropriate and that they would find out information through interviews consistent with policy language. Once the Intake staff completes their portion, the inmates are seen by CCDOC Nursing staff. CCDOC reports no cases in which a transgender or intersex inmate was searched to determine genital status. Intake staff interviewed stated that if the client were resistant to discussing the topic, they would be referred to the medical staff with whom the inmate may be more comfortable. All inmates spoken with supported that they would not get disciplined for not answering questions during the intake about sexuality or prior abuse history.

Indicator (f) The Carroll County House of Correction trains all staff to be respectful, professional, and in the least intrusive practice possible for searching Inmates. All Jail staff are trained to routinely use the back of their hand instead of the front when completing pat searches. Staff confirmed that their training included instruction on conducting cross-gender searches and working with LGBTI Inmates. The training reportedly focuses on professional and supportive communication with the inmate. CCDOC pre-audit questionnaire reports that 100% of the staff have been trained on these procedures. The Auditor was provided with records showing staff training for all. Staff interviews supported the training, including physically performing cross-gender pat searches and emphasizing the importance of communication before touching the inmate. Staff were aware that transgender or intersex Inmates will have a say in the gender of staff who they prefer to complete pat and strip searches.

Compliance Determination

The Carroll County Department of Corrections has a policy in place to address the various elements in this standard. Policy 4-D-200 Prison Rape Elimination Act, and Policy 2-C-100 Searches mirror standard expectations in that cross-gender searches are not allowed except in exigent circumstances. CCDOC goes on to support no cross-gender pat searches of female inmates except in exigent circumstances that are to be documented. The agency extends the same expectation to male inmates: that all non-exigent searches be conducted by staff of the same gender. Training documents and policy cover procedures for opposite gender pat searches and pat searches of transgender and intersex inmates, as well as the requirement of opposite gender staff announcement. The Auditor reviewed the inmates' privacy levels during toileting and showering while on tour. As noted in indicator (d), the facility corrected the cameras that would have allowed cross-gender observation of toilets in observation cells.

Interviews with staff and Inmates were consistent with standard and policy expectations. There is no cross-gender strip or body cavity searches, and inmates can change and perform hygiene without opposite gender observation. Both male and female inmates confirm they are not pat or strip-searched by staff of the opposite gender. The Inmates' report and the auditor observed during the tour that opposite-gender staff members announce their presence, or the officer in the housing unit announces the arrival of female or male staff. The absent and exigent circumstance of cross-gender search compliance was based on policy, interviews with random staff

	and Inmates, records of cross- gender announcements consistent with policy, training materials, and staff training records. Interviews with female Inmates confirm that they are not restricted from program participation by the lack of female staff to perform pat searches. Interviews with staff also support that they have received information on how to complete a respectful pat search of transgender or intersex inmates. The facility did not have any current or recent transgender inmates. Compliance is based on policy, interviews with staff and inmates, and changes made to address potential cross-gender observation of inmates during showering or toileting.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Proprio Language Service Website</p> <p>Purple Communication Website</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Video in English/Spanish observed on tablet</p> <p>Inmate tablets with PREA Information</p> <p>Superintendent</p> <p>Inmates with Disabilities</p> <p>Random Staff</p> <p>Intake Staff</p> <p>PREA Coordinator</p> <p>PREA Signage in English and Spanish</p>

Summary Determination

Indicator (a) The Carroll County Department of Corrections takes appropriate steps to ensure inmates in its jail with disabilities or limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to provide a PREA safe environment. Policy 4-D-200 Prison Rape Elimination Act addresses the concerns of this indicator. The policy states, "In accordance with PREA 115.16, the Superintendent or designee will ensure that inmates with disabilities, including for example, inmates with hearing, vision, intellectual, psychiatric or speech impairments, have an equal opportunity to participate in, or benefit from, all aspects of the Facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment." As a county jail, the facility must be able to provide services to individuals with a wide variety of medical disabilities, including vision and hearing impairments, cognitive impairments, psychiatric impairments, and limited English proficiency. CCDOC provides informative support to those individuals with significant developmental delays or significant mental illness that might make them a target for abuse. The facility has a medical department, and the inmates' support staff will provide and assist individuals with disabilities or cognitive challenges in understanding the Prison Rape Elimination Act and their rights under it. The Auditor spoke with individuals who had hearing loss, but none required communication aids. The agency, with the addition of tablets, can provide video and audio information on PREA. The Intake officer describes how individuals who cannot read, are hearing- or sight-impaired, or have cognitive challenges can be identified. The Carroll County House of Corrections has resources in place to aid these populations, including tablets loaded with PREA information that can be used to magnify information, replay audio, or view visual content. Intake staff confirmed that barriers to comprehension due to disabilities or language would be documented in the electronic case management system, so that others in the facility working with the client can be informed. The facility has limited experience with inmates who are limited English proficient. The facility reports resources for staff to access professional interpretive services. Access to interpretive services, including American Sign Language (ASL), is provided through the medical contract service.

Indicator (b) The Carroll County Department of Corrections has a limited number of inmates whose primary language is not English. The facility does not hold inmates for Immigration and Customs Enforcement. The CCDOC has policy language on working with persons who are Limited English Proficient. The policy directs staff on the use of interpretive services and provides materials in the individual's native language. It states, "Whenever possible, only CCDOC-trained and experienced staff and/or other designated community members shall be used as interpreters. Facility staff will not rely on inmate interpreters, readers, or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first response duties, or the investigation of the inmate's allegations." The CCDOC medical contractor has interpretive contracts with Proprio and with Purple Communication. The Proprio website states that they provide video and phone translation in over 300 languages.

Purple Communications provides interpretive services for people who use ASL. The Auditor did speak with inmates using the Proprio Interpretive services. There were no current inmates who needed ASL interpreters. The Auditor was able to view tour information in both English and Spanish regarding how to report a PREA concern. This information was available on unit walls. Inmate tablets provide information in a secondary language. With volume controls and screen enlargement capacity, individuals with some sight or hearing loss can access the same information as other inmates.

Indicator (c) Staff were aware in their random interviews that it was not appropriate to use inmates to interpret for each other except in extreme emergencies. This prohibition is also addressed in policy 4-D-200 as stated in indicator (b). The Auditor used interpretive services to conduct interviews with inmates. The Individual reported that when speaking with medical personnel or others about private information, they use the interpretive services. The Auditor also deliberately added individuals with Hispanic names to ensure that any Limited English Proficient inmates were not in the facility and were not unidentified.

Compliance Determination

As described in the indicators above, the Carroll County Department of Corrections has policies and resources to work with individuals with disabilities or who are LEP. Their efforts ensure understanding of the various aspects of the agency's efforts to protect, detect, and respond to victims of abuse and harassment. The Auditor was able to speak with multiple Inmates with disabilities, but none who were LEP. The inmates reported knowing their rights, how to report PREA concerns, and how to get help if they had difficulty understanding information. The educational materials in various languages observed on the tour, in the postings, and on the tablets support ongoing access to information.

The CCDOC phone system, along with postings on walls and tablets, provides PREA information, including the PREA video in both English and Spanish (the two most commonly spoken languages at the facility), to provide inmates with continual access to PREA Information. Staff interviewed were aware that it was not appropriate to use Inmates to interpret for each other except in extreme emergencies. Line staff knew to contact a supervisor if they needed to access an outside interpreter. Compliance was based on interviews with staff, inmates, and administration, as well as hard materials (posters, pamphlets, handbooks, videos, interpretive aids), and policies that support equal access to all services.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard

Auditor Discussion
Policies and written/electronic documentation reviewed.
Carroll County Department of Corrections Pre-Audit Questionnaire
Policy 4-D-200 Prison Rape Elimination Act
Policy 7-B-100 Hiring and Employment Qualifications
Employee/Contractor Background Checks
Individuals interviewed/ observations made.
County HR Director
PREA Coordinator
Superintendent
Summary Determination
Indicator (a). The Carroll County Department of Corrections has multiple policies that address its hiring efforts, including PREA policy 4-D-200 and employment policy 7-B-100. Policy 4-D-200 requires that all employees or contractors have a criminal background check to determine if the individual has engaged in any sexual abuse or other conduct that may suggest a likelihood to act inappropriately. The Auditor reviewed the Online Application process for the Carroll County Department of Corrections and the job description. The agency PREA policy 4-D-200 states, "To ensure compliance with PREA 115:17, CCDOC will neither hire nor promote anyone who may have contact with inmates, or enlist the services of any contractor who:
a. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or any other institution as defined in 42 USC, 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 22.b. above." The County hiring policy 7-B-100 also confirms that criminal background checks are completed on all individuals working in corrections. It also goes on to reference that the county, "during the course of the investigation, the Department will comply with the Prison Rape Elimination Act specifically 115.17."
The CCDOC has a questionnaire that captures the above-described information as part of all new employment applications. The Auditor interviewed the County HR

Director and the PREA Coordinator, who confirmed that they would not be hired or promoted if any information is found supporting an individual who engaged in or attempted to engage in any of the behaviors listed in indicator (a). It was also confirmed that any contracted employee would also be screened and asked similar questions. The Auditor was provided documentation of a random sample of staff confirming the Applicant Verification: PREA Hiring and Promotion Prohibitions form was signed.

Indicator (b). Interviews with the Carroll County HR Director and the PREA Coordinator confirm that all new hires, contractors, or promotions require them to confirm that they have not engaged in the items described in indicator (a). Prior employers would be spoken with to determine any history of sexual misconduct or discipline. Any current employee who is up for a promotion will have a file review before an offer is made. The HR Director confirmed that individuals with past disciplinary acts would be brought to the attention of the Superintendent before a job offer is made.

Any applicant or internal candidate must sign the job description for the position they are applying for, including the PREA acknowledgment s that they have not engaged in the activities described in indicator (a). Agency PREA policy states, "In further compliance with PREA 115.17, CCDOC will consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any volunteer, or contractor who may have contact with inmates."

Indicator (c). The Carroll County Department of Corrections completes criminal background checks on all its employees and contractors. The background check includes both state and federal databases, sexual offense databases, motor vehicle checks, and fingerprinting of applicants. Agency employment policy 7-B-100 defines the required parts of a background check. "All applicants, regardless of the position applied for, who have been given a conditional offer of employment, will be required to sign a waiver allowing the Department to conduct an in-depth background investigation to determine their suitability to work in a correctional environment and test their ability and commitment to maintaining a position of trust. This investigation will include, at a minimum: a. Criminal record check. b. Motor vehicle conviction check. c. NCIC/Triple III check. d. Local warrant check. e. FBI Fingerprint check. f. Personal history questionnaire. g. Primary and secondary reference interviews. NOTE: During the course of the investigation, the Department will comply with The Prison Rape Elimination Act, specifically Standard 115.17." The Auditor confirmed that criminal background checks were completed, but by state law, once the report is run and reviewed, it must be destroyed. The Agency has forms in place to track when the initial and the 5-year record checks are done. These Items were all found in place during the site visit review of HR files. The facility has run 24 checks in the past year.

Indicator (d). CCDOC completes criminal background checks on all contracted employees and any approved volunteers. In interviews, contracted staff confirmed they must pass a background check before being allowed into the facility. The facility

HSA also confirmed that their employer will also complete background investigations on employees.

Indicator (e). CCDOC provided the Auditor with information on five-year criminal background checks. The Superintendent, who previously ran background checks for the facility, confirmed that all current employees have a record check completed every five years. The staff were all completed before the last audit three years ago. As noted in indicator (c) the agency has a form documenting when the criminal background checks are completed. CCDOC policy also requires this. "The agency will conduct criminal background checks every 5 years of current employees and contractors who may have contact with inmates." The Auditor reviewed the files of the current staff, including a review of new employees and senior employees employed for more than 5 years.

Indicator (f). The Carroll County Department of Corrections requires all employees to sign at the time of hire and promotion that they have not committed any of the acts described in indicator (a). All employees interviewed understand the ongoing responsibility to report any sexual misconduct, whether by themselves or by anyone else, to their supervisor. The PREA Hiring and Promotion Prohibition form, in addition to having the applicant confirm they have never engaged in the acts described in indicator (a) it states the following: "I acknowledge and understand that, should I become the subject to these prohibitions in my current position or any other subsequent departmental position I may hold contact with persons in confinement or under supervision. I will notify departmental management within 24 hours of my involvement in any of the above. I understand the CCDOC has the authority to conduct random criminal background checks under previous standard 115.17 section (e) to ensure compliance with these federal standards in relation to the CCDOC employment practices. Further, I understand that if I am the subject of these prohibitions, I may be subject to termination on employment. In addition, if I falsely certify my eligibility for employment and it is subsequently discovered that I have involvement in any of the above, I will be subject to termination or disqualification for employment for these falsifications."

Indicator (g). The CCDOC addresses the indicator's concern about accurate information provided at the time of employment. As noted in indicator (f) the form has language requiring truthful and accurate information. Similar information appears on the agency's employment application, which states, "I certify the given answers herein are true and complete to the best of my knowledge." "In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer." The PREA Coordinator confirmed that staff members who provide false information or purposefully omit information would be terminated. No individual employees or contractors have been

fired for inaccuracies related to PREA topics. The Auditor recommended improvements to the documentation of this process.

Indicator (h). With proper releases of information, the CCDOC allows the agency to disclose PREA-related concerns to other institutions. Interviews confirm they may receive requests from outside employers when hiring. The Lieutenant or Captain will speak with prior employers, including both institutional and non-institutional employers. The Auditor was able to see where a current staff member had worked in another state. There were zero requests from a former staff member seeking employment at another correctional facility in the last year. The CCDOC has all prospective employees sign a release of personal information, which is forwarded to any prior employer. The online application informs applicants that the facility may ask questions about the job's suitability as part of the agency's zero-tolerance efforts.

Compliance Determination

The Carroll County Department of Corrections has policies and procedures for hiring that comply with the standards. The agency's PREA policy 4-D-200 selection addressed various aspects of the standard's indicators. The CCDOC has implemented and had all existing staff sign the PREA Hiring and Promotion Prohibitions form in the past year. The Auditor interviewed the HR Director and the PREA Coordinator regarding the conduct of background investigations for all employees. The agency requires all staff and contractors to undergo criminal background checks, including federal and multi-state criminal checks as well as a review of Motor Vehicle and sex offender registries. The Auditor also reviewed appropriate personnel forms and criminal background checks for both employees and contractors. Record reviews support employees and contractors at the Carroll County Department of Correction, who are undergoing prior institutional employer checks, pre-employment criminal background checks, and subsequent checks every five years.

The Auditor also reviewed the online application and hiring policies. Compliance with this standard is based on the policies, documentation provided in advance and confirmed during the onsite visit, and interviews with the Lieutenant, the PREA Coordinator, the Administrative Assistant, and the Superintendent.

115.18 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policies and written/electronic documentation reviewed.

Carroll County Department of Corrections Pre-Audit Questionnaire

POLICY 4-D-200 Prison Rape Elimination Act

Individuals interviewed/ observations made. PREA Coordinator

Superintendent

Observations on tour

Summary Determination

Indicator (a) The Carroll County Department of Corrections has not undertaken any major modification in the past three years.

Indicator (b) The Carroll County Department of Corrections has not reportedly added any new monitoring technology since the last audit.

Compliance Determination

The Carroll County Department of Corrections has not undertaken any major renovations to its physical plant or monitoring technology in the last three years. The agency has policy language that addresses this standard. "If the Superintendent determines that a substantial modification of the Facility's infrastructure is necessary, or that the Facility's video monitoring technology needs updating or enhanced, he/she - in consultation with the PREA Coordinator - will consider how such modifications might enhance the Department's ability to protect inmates from sexual abuse."

Policy goes on to state, "Along with the Facility's commitment to paragraph VI. A.17 above, regarding technology and staffing reviews, the CCDOC will ensure compliance with PREA 115.18 which requires that any Facility planning expansion or modification will include consideration of the effect upon the Facility's ability to protect inmates from sexual abuse, and requires consideration of how new or updated video monitoring systems, electronic surveillance systems, or other monitoring technology may enhance CCDOC's ability to protect inmates from sexual abuse."

The PREA Coordinator confirmed the ongoing efforts to address safety needs at all levels of the institution. Interviews with the Superintendent and PREA Coordinator further support the organization's commitment to using technology to improve safety and an understanding of the need to consider sexual safety in any future physical plant modifications. Compliance is based on information provided, observations on the tour, knowledge of staff and supervisors about blind spots, and policy language in place that requires these considerations.

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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Prime Care Policy- Response to Sexual Abuse</p> <p>State of New Hampshire Guideline for Forensic Sexual Assault cases Starting Point Website</p> <p>Huggins Hospital website (SANE nursing)</p> <p>MOU with Starting Point (local Rape Crisis Agency)</p> <p>New Hampshire Attorney General website (victim compensation program)</p> <p>Letter from the Sheriff on Investigations</p> <p>Individuals interviewed/ observations made. random staff</p> <p>Prime Care Medical staff</p> <p>Sexual assault trained Investigator.</p> <p>Starting Point representative</p> <p>Huggins Hospital representative (forensic exam access and services)</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections is responsible for the completion of administrative investigations at the jail. The Carroll County Sheriff's Office would complete criminal Investigations. Agency Policy states, "All reports of sexual assault, sexual solicitation, or sexual coercion will be investigated by the</p>

Deputy Superintendent or by his/her designee and by the Carroll County Sheriff. Immediately reporting sexual assault, sexual solicitation, or sexual coercion is critical, and allows for the timely delivery of support services to offender victims, and to holding perpetrators accountable for their behavior." The Agency policy provides the investigators with a uniform standard of evidence collection on-site.

- "A. The Attorney General's fourth edition Sexual Assault Manual (2018) lists the protocols for collecting and packaging evidence. Supervisors will ensure that they familiarize themselves with said protocols.
- B. The examiner should always wear powder-free gloves when collecting and packaging evidence. The examiner should always change gloves between specimen collections.
- C. Clothing and other evidence specimens must be sealed in paper or cardboard containers.
- D. All wet evidence should be dried prior to packaging whenever possible.
- E. In the event that the evidence is wet, the items may be first placed in paper bags, then into plastic bags, provided that holes for ventilation are made in the plastic bag.
- F. Urine specimens obtained should be sealed in a bio-hazard bag, then in a paper bag and never placed inside the evidence kit.
- G. All hospital Occupational Health and Safety regulations should be followed, per Institutional policy.
- H. Envelopes containing evidence should never be sealed with the examiner's saliva. Self-adhesive envelopes or tape should be used.
- I. Paper bags should be sealed with tape, never staples.
- J. A chain of custody with each piece of evidence collected should always be maintained. 23
- K. The Attorney General's 2018 edition, Best Practices for Medical Providers, page 43 states: "...if the sexual assault occurred within 5 days of the examination, a Sexual Assault Evidence Kit is to be used."

As noted above, the state of New Hampshire has a protocol specifically for forensic examination and collection of evidence in sexual assault cases. The protocol was developed through the Attorney General's office with the assistance of medical, legal, and sexual assault advocates to ensure uniform practice. Neither CCDOC medical staff nor Prime Care physicians would complete the forensic exam. Instead, the inmate victim would be sent to a local hospital in the region for a forensic exam. Interviews with randomly selected staff confirmed that they understand the importance of preserving evidence. They were able to identify the steps needed to secure crime scenes and encourage the preservation of evidence for both the

reported victim and the accused. The CCDOC's Investigator has received training in crime scene investigation, as he previously worked for the sheriff's office, which also required investigating criminal acts at the jail.

Indicator (b) The New Hampshire protocol, as noted in Indicator (a) developed through the Attorney General's office, covers procedures for youth, but the Carroll County Department of Corrections does not serve that population. The Protocol has a committee that reviews current practices and adjusts them consistently with national trends for best practices. The New Hampshire Protocol has been updated several times to the current edition, which was completed in 2024. The Auditor reviewed the protocol and compared it to the U.S. Department of Justice document cited, finding the topics to be similar. The person committee includes a representative from the Attorney General's office, Law enforcement, Rape Crisis Advocates, Prosecutors, Medical staff, SANE-trained individuals, and Forensic experts. Carroll County DOC quotes the protocol requirements in several locations in the policy.

Indicator (c) The Carroll County Department of Corrections will offer victims of sexual assault the ability to have a forensic exam without cost. The facility would not complete a forensic exam. They would be transported to Huggins Hospital, which is 8 miles from the prison. The PREA policy 4-D-200 (page 16) states, "treatment services will be provided to every victim without financial cost, and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident." The Auditor confirmed with the Huggins Hospital that, though the nurses have not all completed the state-certified class, the routine nursing competencies have prepared them to complete sexual assault exams. Some of the current staff have reportedly gone through SANE training programs in the past. The Attorney General's Office has an advisory committee that sets the training requirements for the certification of nurses, which the state umbrella rape crisis agency, the New Hampshire Coalition against Domestic and Sexual Violence, oversees. The Hospital's nurse also confirmed that they would routinely offer victims of sexual assault a victim advocate to support them during the lengthy exam process. The Starting Point representative also commented that hospitals in the region will bring in SANE-certified nurses if available.

Indicator (d) The Carroll County Department of Corrections has entered into agreements with the local rape crisis agency to provide support services to victims of sexual assault. Starting Point is part of a 13-agency coalition against domestic and sexual assault in New Hampshire. A new version of the MOU was signed in January and forwarded to the Auditor. The MOU clearly states that they will provide accompaniment services to victims taken to the hospital for forensic exams. The hospital representative also confirmed it is their protocol to offer the services of an advocate to all victims of sexual assaults.

Indicator (e) Both hospital and PREA Coordinator staff confirm that a rape crisis staff member would be available to help a victim through a forensic exam, criminal justice interview, and provide ongoing support and referral to the victim. The Memorandum of Understanding with Starting Point was provided to the Auditor, stating this was possible. The Starting Point representative confirmed that they would respond to a hospital and provide emotional support through professional visits during criminal investigator interviews. They can also make referrals to other agencies if an individual is released from prison and transferred to another part of the state. The current MOU runs from September 1, 2024, to September 1, 2025.

Indicator (f) The Carroll County Sheriff's Office is responsible for completing investigations at the Carroll County Department of Corrections. The CCDOC Captain supports a working relationship with the Sheriff's Office. The Lieutenant, the facility's administrative investigator, confirmed the ongoing relationship between agencies. The Lieutenant explained how they would maintain contact to ensure an open line of communication and that they would share the Prison Rape Elimination Act requirements with the investigators. The MOU between the facility and the Sheriff's office confirms the responsibility to investigate sexual assaults at the facility, utilizing the state's protocols. If the allegation is against a staff person or contractor, the case can also be referred to the state's Attorney General's Public Integrity Unit (PIU) to investigate the crime. The governor created the PIU to ensure transparent investigations of public officials or those working with clients of government agencies.

Indicator (g) The Auditor is not required to review this indicator.

Indicator (h) The Auditor is not required to review this indicator as the CCDOC has a history of providing access to victim advocates from a local Rape Crisis Agency.

Compliance Determination

The Carroll County Department of Corrections has policies addressing this standard's concerns. The State of New Hampshire Attorney General's Office, along with state experts, has developed a process for forensic exams consistent with the National Protocol for Sexual Assault Forensic Exams. Investigative procedures are in place to ensure evidence is preserved, and staff are trained to preserve evidence in a sexual abuse case. A Detective from the Carroll County Sheriff's Office or a PIU Investigator would conduct the criminal investigation, and the agency has policies that describe communication levels between agencies. The area also has a hospital with confirmed forensic procedures. The Auditor spoke with hospital staff who confirmed the hospital

	would call a local rape crisis agency in addition to the protocol set up by CCDOC to offer supportive services. A memorandum of understanding is in place with Starting Point, a regional rape crisis agency. The Auditor confirmed that a victim advocate would be sent to support the inmate through the forensic exam and any interviews as part of the investigative process. Compliance is determined based on the availability of resources to effectively investigate, secure, and process evidence. The Auditor reviewed the MOU with Starting Point and discussed the availability of trained nurses at local hospitals. In addition to trained sexual assault investigators, the Auditor also considered that CCDOC staff knew the importance of protecting evidence, including advising inmates not to do anything that would degrade the evidence on their person.
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 7-A-102 Administrative Investigations</p> <p>Policy 7-A-103 Criminal Investigations</p> <p>Policy 2-C-103 Crime Scene Search, Evidence, and Crime Scene Preservation</p> <p>PREA Investigations</p>
	<p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Facility Investigator</p> <p>Observations on the Tour</p>
	Summary Determination

Indicator (a) The Carroll County Department of Corrections has systems in place to ensure criminal and administrative investigations occur in a timely fashion at their facility. The PREA policy set forth the requirements consistent with standard language stating that all investigations. "All reports of sexual assault, sexual solicitation, or sexual coercion will be investigated by the Deputy Superintendent or by his/her designee and by the Carroll County Sheriff. Immediately reporting sexual assault, sexual solicitation, or sexual coercion is critical and allows for the timely delivery of support services to offender victims, and to holding perpetrators accountable for their behavior." The Carroll County Department of Correction has all allegations of sexual abuse or sexual harassment reported to the PREA Coordinator, who will notify the Lieutenant, the Deputy Superintendent, and the Superintendent. If the allegation is not criminal in nature or involves allegations of staff misconduct, then the trained Jail staff will conduct a non-criminal, administrative investigation. The facility has investigation policies that direct the process if the investigation is being done internally or externally. The CCDOC had four investigations related to claims or sexual abuse or sexual harassment. All four resulted in administrative investigations, and none were found to be criminal in nature as they were unfounded.

Indicator (b) The Carroll County Department of Corrections has three policies and an MOU that address the requirement of this standard: Policy 4-D-200 Prison Rape Elimination Act, Policy 7-A-102 Administrative Investigations, Policy 7-A-103 Criminal Investigations. The facility works with the county Sheriff on crimes that occur at the jail. This defines the relationship and ensures that documentation is maintained for all communication between agencies. As noted previously, the AG's Public Integrity Unit can also take on the criminal investigation if the allegations are against staff or contractors.

Indicator (c) The Auditor reviewed policy and the state protocols before interviewing the investigator about how communication is required between the jail and the outside criminal investigator. Policy 7-A-103, Criminal Investigations, also outlines the process for coordinating with the Carroll County Sheriff's Office when the facility becomes aware of a criminal act. The policy outlines the requirement for preserving evidence and obtaining written staff statements. The policy also outlines procedures for incidents involving other law enforcement agencies. In allegations against staff, the State's Attorney General's Office would be notified. In cases of death, the New Hampshire State police would also be involved.

The PREA Coordinator and the Lieutenant both confirmed that there would be ongoing communication between the agencies.

Indicator (d) Auditor is not required to audit this provision. Indicator (e) Auditor is not

	<p>required to audit this provision. Compliance Determination</p> <p>The Carroll County Department of Correction has the policy and trained investigative staff in place to ensure all allegations of sexual assault and sexual harassment are investigated. The DOC has access through the Sheriff's Office to trained law enforcement staff who will ensure all crimes, including sexual assaults, are investigated. The Carroll County Department of Corrections has investigated all incidents of sexual contact by inmates. Compliance is determined utilizing the above-stated information that meets Indicators' requirements (a) and (b) and the documents and interviews supporting the relationship between the DOC and the Sheriff's Office. Interviews further supported compliance, as the agency takes all allegations, including those from third-party sources, seriously and ensures the impartiality of investigations involving staff.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p>Carroll County Department of Corrections PREA Training materials</p> <p>CCDOC training records</p>
	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Random staff</p>
	<p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction ensures all staff are trained in the agency's Zero Tolerance for Sexual Misconduct and the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment allegations. In policy 34 D 200 Sexual Assault Prison Rape Elimination Act, the policy sets forth training requirements, including a description of all the elements listed in Indicator (a). The policy states, "In accordance with PREA 115.31, CCDOC will train all</p>

employees who may have contact with inmates on:

- CCDOC's zero tolerance policy for sexual abuse and sexual harassment;
- how CCDOC staff are expected to fulfill their responsibilities under the Facility's sexual abuse and sexual harassment prevention, detection, reporting and response policy;
- an inmate's right to be free from sexual abuse and sexual harassment;
- the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- the dynamics of sexual abuse and sexual harassment in confinement;
- the common reactions of sexual abuse and sexual harassment victims;
- how to detect and respond to signs of threatened and actual sexual abuse;
- how to avoid inappropriate relationships with inmates;
- how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, queer, intersex, or gender non-conforming inmates; and
- how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
- All training that relates to PREA will be tailored to the genders of the inmates at the Facility."

The Policy goes on to state, 'In compliance with PREA 115.31 and 115.32, CCDOC shall ensure that all staff, volunteers, and contractors who have contact with inmates and who receive PREA training understand the training that they have received through employee signature or electronic verification.' The Auditor reviewed the training materials from the Carroll County Department of Corrections to confirm that the elements described in this indicator were addressed. The 107-page PowerPoint covers the requirements of this indicator. The PREA Coordinator confirmed that no matter what role in the institution, all employees are aware of their role in preventing, detecting, and responding to sexual assault and sexual harassment of inmates. In interviews, random staff members described things they do daily to keep inmates' PREA safe. The staff members knew the signs and symptoms of someone who may be victimized, the rights of inmates related to PREA, and were able to give examples of why sexual assaults may occur. Staff members confirmed they get training on how to avoid getting into inappropriate situations with an inmate, their first responder duties, the right of both staff and inmates to report without fear of retaliation, and how to work with LGBTI Inmates respectfully. The staff knew to use the transgender or intersex inmate's preferred pronouns, as all inmates are addressed as 'inmate last name'. They were aware that a multidisciplinary committee reviewed the transgender inmate's case individually to determine housing, canteen items, search procedures,

and other accommodations for safety. The Auditor also reviewed a 30-slide Relias training, which is used to refresh staff every other year. Staff also report that shift briefings include reminders about related topics.

Indicator (b) The Carroll County Department of Correction is a co-correctional environment. All employees are trained in working with both male and female inmates, including how males and females may differ in their reactions to abuse. Staff provided examples of how women and men might be targeted for sexual abuse or how their reactions might differ as victims. Since there is only one facility in the county, all staff are trained using the same information, and there are no transfers. The Auditor confirmed that new staff who had worked in a prior correctional setting would still receive full training at the time of PREA training at the Carroll County Department of Corrections.

Indicator (c) The CCDOC employees and contractors report that they receive training on PREA annually. All new staff receive education on PREA at CCDOC upon hire and then annually, either through refresher training or updates to any related policies. Staff records and their knowledge of the training information indicators support that all staff have received training. Staff report that they get a full PREA-specific training annually, and updates to policies or other information are received at shift briefings. The Auditor requested the training records from the selected HR files, which included employees in their first year as well as senior staff whose records support PREA training that has been ongoing since the last audit.

Indicator (d) The PREA Coordinator reports that staff sign into training to get credited for the annual training hours. The Auditor reviewed the training records to ensure that all staff, not just correctional officers, completed the mandatory class. The training material covers inmate/Staff boundaries and other measures staff can take to support a zero-tolerance culture and prevent allegations by inmates against staff, including maintaining a professional demeanor at all times. The Agency policy states, "CCDOC shall ensure that all staff, volunteers, and contractors who have contact with inmates and who receive PREA training understand the training that they have received through employee signature or electronic verification." The Auditor based compliance with this indicator on the staff's apparent retention of the training knowledge, as evidenced by random staff interview questions and the documentation provided.

Compliance Determination

All staff are trained in the Carroll County Department of Corrections' Zero Tolerance policies toward sexual assault and sexual harassment. The employees confirmed they have been trained on PREA and understand their duties related to policy 4 D 200 Sexual Assault Prison Rape Elimination Act, including how to protect, detect, and

	respond to incidents of sexual harassment or sexual abuse. The Auditor requested the training records of randomly selected staff members, which further supported the annual training when reviewed. In addition to reviewing the training materials in indicator (a), the Auditor considered the staff's ability to describe these elements in their interviews, which supported the retention of the information. Compliance determination was based on training records, the materials used in presentations, and the ability of randomly selected staff to share examples of the content they had learned as part of PREA training, consistent with standard requirements.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p>Carroll County Department of Correction PREA Training materials</p> <p>CCDOC training records for Contractors and Volunteers</p>
	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Contracted staff</p> <p>Religious Volunteers</p> <p>Observation on tour</p>
	<p>Summary Determination</p> <p>Indicator (a) There are limited contracted staff at CCDOC mostly in the Health Services Department. The facility also has 21 volunteers providing service to inmates at the Carroll County Department of Correction (AA/NA, Bible Study, religious services) . Healthcare staff at CCDOC are employed by Prime Care, a Medical treatment provider, and the Mental Health Contractor is employed through a local mental health clinic. All contractors and volunteers with routine access to the facility are required to complete the PREA education program. As part of that program, the individuals are trained on PREA consistent with the agency policy, which requires</p>

training on the zero-tolerance culture toward sexual assault or harassment and knowing when and how to report concerns. CCDOC policy sets forth the requirement when it states, “all volunteers and contractors who have contact with inmates shall be notified of the Agency’s zero-tolerance policy regarding sexual abuse and sexual harassment; and will be informed of CCDOC’s requirements and procedures for reporting such incidents.” As most contracted staff work full-time, they receive the whole PREA education class given to staff. The contractor will be educated about PREA by the Lieutenant who serves as the PREA investigator.

Indicator (b) The CCDOC policy speaks to the training program when it states, “Volunteer and Contract Training, all volunteers and contractors who have contact with inmates shall receive training on their responsibilities under CCDOC’s policies and procedures regarding sexual abuse/harassment prevention, detection, and response.” The level and type of training provided to infrequent contractors and volunteers is based on the services they provide and the level of contact they have with inmates. The Lieutenant determines the level of education the contractor or volunteer needs. All contractors, interns, and volunteers who have contact with inmates are notified of the CCDOC’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed of how to report such incidents. The Auditor confirmed with healthcare staff that individuals providing direct services to inmates undergo CCDOC training annually. Individuals who have routine visits (such as religious staff, AA/NA, and educational volunteers) receive an abbreviated educational program. The Auditor was provided with examples of orientation training materials for any new contractors/volunteers.

Indicator (c) The policy requires individuals to sign for the information they receive. “CCDOC shall ensure that all staff, volunteers, and contractors who have contact with inmates and who receive PREA training understand the training that they have received through employee signature or electronic verification.” The form states, “I have received training on the quote standards of ethics for volunteers and contractors.” “I have also had an opportunity to ask questions or get clarification on any issues regarding my volunteer activities or contract services with the Carroll County Department of Corrections.” The Auditor was provided with documents for all 21 contractors or volunteers approved to enter the jail. The Auditor was also able to speak to contractors and volunteers as part of the audit process to confirm they were educated on PREA. Each of the individuals was able to confirm the training and describe the information that it contained. Each person knew the importance of reporting any suspicions they had to supervisory staff.

Compliance Determination

CCDOC is compliant with the standard expectations. The facility ensures all contractors and volunteers receive training in the agency's efforts to prevent, detect,

and respond to sexual assault and sexual harassment. Training records, interviews with contractors on the tour, and formal interviews support that they have received comprehensive training on the zero-tolerance policy and how to report a concern.

Training records and interactions with contractors as part of the tour clearly support understanding the agency's zero tolerance for PREA-related issues. Compliance was determined through supporting documents, random site visits, and interviews with contracted staff members who were able to identify training elements. The Auditor was able to use the volunteer training materials and past documentation of training for this group to support compliance. The Auditor also considered that information is provided to all individuals entering the facility, educating them on PREA and how to report a concern.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act Inmate phone system Inmate Handbook Inmate Tablet Inmate Sign-off documentation Inmate tablet Individuals interviewed/ observations made. Intake Staff Person Classification staff Inmates Observation on tour of PREA Signage in multiple languages Observation of the PREA Video.

Summary Determination

Indicator (a) The Carroll County Department of Corrections requires that Inmates receive information at the time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The CCDOC policy “In compliance with PREA 115.33, at the time of intake, all inmates will receive information about the CCDOC’s zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment.” Interviews with the booking officer and the inmate support staff indicate that they are providing information about PREA upon admission. Though few inmates confirmed they were under the influence and were not able to provide specific details, they all understood what the PREA is and the zero-tolerance stance of the agency, and at least two ways they could report a concern. The Auditor suggested refreshing booking officers to ensure a consistent message is conveyed to the inmates verbally and ensuring they are given the PREA brochure, as tablets are not always available in the first few days. All PREA information can be found in the inmate handbook and on the walls of the housing units. Inmates do sign that they are provided information at intake. The facility reports in the OAS 100% of the inmates admitted are provided with information. Booking officers confirm they can use handheld translators, bilingual staff, or phone professional interpreters to impart the information, depending on the language and the inmate's level of English comprehension. The facility had 852 admissions in the past year.

Indicator (b) All Inmates at CCDOC are provided with the facility-specific PREA information within 30 days of entering the facility. CCDOC PREA Policy addresses the indicator when it states, “In further compliance with PREA 115.33, within 30 days of intake, all inmates transferred into CCDOC from other facilities, as well as all newly admitted inmates, shall receive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents, and on CCDOC’s policy and procedures for responding to such incidents.” As a pretrial facility, many inmates are released before the 30-day period. The data provided showed that only 196 individuals, or about 23% of the population, stayed over 30 days in the previous 12 months. The facility reports show that all inmates who remained in the facility for 72 hours were provided with enhanced education on PREA. The facility will try to provide follow-up education and answer questions the inmate might have during classification meetings, which occur within three days of admission and again at 30 days.

All inmates have access to the PREA materials on the unit, in their handbook or on tablets they can use. The materials outline the facility's procedures for investigating and supporting individuals in the event of an incident. Inmates can access written PREA materials, the PREA Education Video, and the inmate handbook. Random inmates confirmed they have received education on PREA, although many indicated they have not accessed the materials on the tablet; they were aware it was there.

During the tour, inmates showed how to access the PREA video. The Auditor observed materials posted on the units regarding reporting. He confirmed with inmates through formal and informal conversations that they were aware of PREA, knew how to report a concern, understood that reports could be made without fear of reprisal, and were informed that the facility would investigate all allegations. The agency policy covers new admissions' education when it states, "The Inmate Orientation and intake process for newly admitted inmates will include offender education, consisting of verbal and written information about preventing and reporting sexual assault. CCHOC's Inmate handbook shall also include the same information."

Indicator (c) All Inmates at the Carroll County Department of Correction have received an education on PREA and how to report any concern, as noted in indicator (b). No individual in custody was incarcerated at the facility at the time the law was enacted, and no individual in the current population was an inmate three years ago who was in the facility at the time the last audit occurred. The Agency does not treat individuals transferred from other county jails any differently than those directly admitted to the Carroll County Jail. The Superintendent confirmed that there are limited reasons for inmates to be moved between county jails. As noted in 115.12, the facility receives female inmates from other counties and the state DOC as part of housing contracts. The Auditor spoke with Inmates from other counties, who reported being educated about PREA at CCDOC. All but one confirmed that they were educated on PREA at admissions. Most also reported receiving PREA Information at their home facility. CCDOC policy addresses the indicator when it states, "all inmates transferred into CCDOC from other facilities, as well as all newly admitted inmates, shall receive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents, and on CCDOC's policy and procedures for responding to such incidents."

Indicator (d) Education is available to inmates at CCDOC in multiple languages and forms, from written to video to large print documents. The videos can include closed captions for hearing-impaired inmates on the tablets. Inmates support the idea that they can go to staff if they need assistance with comprehension of written or oral PREA education. The assistance is available to any individual who needs it, including those with physical disabilities, cognitive limitations, or difficulties with reading. Many inmates stated that PREA was not a concern, but they acknowledged that the information was available and noted that there were people who could assist, including line officers. During the tour, the Auditor observed PREA Information in two languages. He had an inmate demonstrate how to access PREA information and the detainee handbook using both the tablet system and a kiosk. The PREA Coordinator reports that the CCDOC will provide inmate education in formats accessible to all inmates, including LEP, disabled, and inmates with limited reading skills. The Auditor confirmed this in interviews with inmates and observations while moving about the facility. The Auditor was provided with a handbook in Spanish, the second most commonly spoken language. The CCDOC reports having limited experience with

individuals who do not speak English. Inmates' support staff would be able to aid those who have difficulty with reading comprehension. Tablets enable individuals to enlarge written materials, while videos facilitate repetitive playback.

Indicator (e) The Auditor reviewed documentation that inmates signed at admission, including the handbook. The Auditor took a random sample of the population and reviewed the documentation of the inmates' education. Records were uploaded in 115.41 as part of screening information.

Indicator (f) CCDOC ensures that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. The PREA video, handbook, and PREA Brochure information are all available on the tablet. The Video is also available on the video visit kiosk. Observations throughout the tour confirm that materials are continuously available to inmates. The information viewed included electronic handbooks, posters, and other signage about PREA, the local rape crisis agency, and reporting resources. Inmates have access to tablets that provide the same information found on the unit, including PREA-specific information and institutional information such as the inmate handbook.

Compliance Determination

The Carroll County Department of Corrections expects inmates to be educated upon admission. The agency expects that all individuals have been informed, regardless of their disability or language barrier. Inmates at CCDOC confirm they are educated on PREA and zero-tolerance expectations. PREA information is reviewed with the inmate by the Intake Officer. They are provided with a PREA brochure and informed about other sources of PREA information and upcoming additional education opportunities. The information reviewed is signed by the inmates and placed in their case records. The inmates have access to handbooks that inform them about the consequences for negative behavior, including sexual misconduct. It also tells the reader about PREA and the importance of reporting and seeking help. Information, available in multiple languages, includes contact details for external agencies and the local rape crisis agency.

CCDOC has provided multiple ways for inmates to access PREA information at intake and throughout their stay. The compliance determination considered the supporting educational documents, the inmates' answers regarding training, and their knowledge of facility-specific steps for reporting concerns. Further supporting compliance is the Auditor's review of the materials the facility provides to educate and document inmates about their rights related to the Prison Rape Elimination Act. The Auditor's observation of posted materials and informal discussions with inmates on the tour further supported an environment where the zero-tolerance toward sexual abuse or harassment is understood.

115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p>Training information for the investigator</p> <p>Website of the training provider</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Interview with trained Investigator</p> <p>Investigative files</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections (CCDOC) investigates only non-criminal administrative cases of sexual harassment. If the allegation is of a sexual assault or appears to be criminal in nature, the case would be investigated by the Carroll County Sheriff's Office (CCSO). The CCSO staff are law enforcement officials certified by the State of New Hampshire and are empowered to investigate and make arrests. The PREA Coordinator confirmed that staff at CCDOC and CCSO have been trained in investigating allegations of sexual misconduct in a correctional center. The Lieutenant at CCDOC responsible for completing administrative investigations took a two-day course on completing sexual abuse investigations. The Auditor reviewed the training materials provided and the state's Police Standards and Training Council's website.</p> <p>Indicator (b) The Auditor reviewed the training outline to ensure the content was consistent with the standards required by the standard. The interview with a trained</p>

investigator confirmed the training covered how to communicate with a victim of sexual assault, the use of Miranda and Garrity Warnings, proper steps in the collection and preservation of evidence, and the factors in deciding on substantiation for administrative action or prosecutorial referral. The training also covered the National Protocol for Sexual Assault Forensic Examinations and successful interview skills for victim interviewing. The Auditor also spoke with the investigator about how they would implement the elements of the training in the course of an investigation. Agency policy states, "Staff conducting investigations into sexual abuse and sexual harassment of inmates will receive specialized training in the techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral." The CCDOC also trains all staff on how to preserve a crime scene and protect evidence from contamination.

Indicator (c) Training curriculum and a copy of the certificate were provided for the Lieutenant who completes investigations. The Lieutenant is new to the role and can use the Superintendent as a resource, who previously served as the investigator and is a certified law enforcement officer.

Indicator (d) The Auditor is not required to review this indicator.

Compliance Determination

The Carroll County Department of Corrections ensures that staff who complete investigations have received appropriate training on investigating sexual assault in a correctional setting. Documents and interviews support that the facility's investigators are trained in the requirements of a PREA-related investigation. Examples of completed investigations, along with supporting training documents, also supported the Auditor's findings.

115.35 Specialized training: Medical and mental health care	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed.
	Carroll County Department of Corrections Pre-Audit Questionnaire

POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act

PrimeCare Policy: Response to Sexual Abuse

Training Relias

HSA Letter on Medical Staff training on treating victims of sexual abuse

Individuals interviewed/ observations made.

Medical Staff

Mental Health

Interview with Hospital staff

Summary Determination

Indicator (a) Carroll County Department of Corrections PREA policy requires specialized training for medical and mental health staff. "The Department requires that full and part-time medical and mental health care providers for inmates are trained to detect and assess signs of sexual abuse and sexual harassment, to preserve physical evidence of sexual abuse; to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how- and to whom - to report allegations or suspicions of sexual abuse and sexual harassment." The CCDOC ensures that all full and part-time healthcare practitioners in its facilities have been trained in the detection of signs of sexual abuse and sexual harassment. The training also includes how to preserve physical evidence of sexual abuse, effective communication skills for communication with victims, and how to report a concern. PrimeCare, the employer of the healthcare staff, uses Relias and its own policies to ensure staff are properly trained on what to do with a potential victim of sexual abuse. The Health Services Administrator reports that staff are trained on key elements in indicator (a). The Auditor's formal and informal conversations support that medical staff know how to protect DNA evidence and who to notify in the correctional staff upon becoming aware of a sexual assault.

Indicator (b) The staff does not complete a forensic exam. Discussions with the local hospital confirmed the availability of trained nurses performing sexual assault exams.

Indicator (c) Documentation was provided to the Auditor for the staff confirming that specialized training for healthcare staff was complete. The Auditor reviewed the training materials from the Relias course and the PrimeCare Policy internal training for medical and mental health professionals. Members of the medical staff confirmed they had completed both the specialized training and the CCDOC PREA training. The part-time Mental Health Consultant, who previously worked for the facility, was

recommended to take the NIC course.

Indicator (d) A review of the training record and the interview with staff confirms that all Medical and Mental Health Staff received the same training as the CCDOC employees annually, and the training described in 115.32. The Auditor's review of CCDOC training records further supports compliance.

Compliance Determination

Medical and Mental Health Staff at CCDOC have completed appropriate PREA training focused on medical and mental health. The Auditor met formally with staff and asked questions during the tour and subsequent movements in the facility.

Medical and Mental Health staff knew to whom to report allegations and suspicions of sexual abuse or sexual harassment. They explained that the reporting would go up their agency's chain of command, while also notifying the chain of command at the jail. Medical and Mental Health staff were also instructed to report any concerns to the PREA Coordinator, Investigator, Major, or Superintendent. Medical staff will not conduct forensic medical examinations, but they are aware of how to protect evidence and which facilities they would refer inmates to for an exam by a SAFE or SANE if needed. Compliance is based on the medical and mental health staff's knowledge of how to protect the inmate victim and evidence, as well as how to provide ongoing support. As noted, Indicator (b) It is NA, but the auditor confirmed that forensic exams are available in the community.

115.41 Screening for risk of victimization and abusiveness	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4 D 200 Prison Rape Elimination Act Auditor Selected files for review Screening tool (modified)
	Individuals interviewed/ observations made.

Superintendent
PREA Coordinator
Health staff.
Classification Officer
Random Inmate
Intake staff
Observations on tour

Summary Determination

Indicator (a). All inmates admitted to the Carroll County Department of Corrections, including transfers, are screened for potential victimization, regardless of how often or recently they have been in custody. PREA Policy 4-D-200 sets forth this requirement. The policy states, "Upon arrival, all inmates will be screened, using an objective screening instrument, to determine potential vulnerabilities to sexual abuse. These vulnerabilities include age; physical build; whether the inmate has been previously incarcerated; identifying or presenting as LGBTQIA, (lesbian, gay, bisexual, transgender, queer, intersex, asexual) or as gender-nonconforming; having mental, physical or developmental disabilities; limited English speaking skills; having experienced previous sexual victimization; being physically weak or impaired; recovering from injury or intoxicated; accused or convicted of certain crimes including sex offenses against an adult or child (4-ALDF-4D-22-1) or whose criminal history is exclusively nonviolent; the inmate's own perception of vulnerability; and whether the inmate is detained solely for civil immigration purposes." The agency's Classification policy also sets forth a requirement for all detainees to be screened upon admission for risk of being abused or being a perpetrator of abuse. The facility utilizes information provided in both interviews and review of records to ensure accuracy. The Auditor was provided with examples of admission records and reviewed, onsite, a random sample of the current population. Inmates spoken with all confirmed they were asked questions consistent with the PREA screening tool. The interview with the booking officer confirmed that detainees being transferred into the County Jail are processed in the same way as direct admissions.

Indicator (b) The CCDOC policy requires intake screening to occur on the first day. "Inmates housed at this Facility will be screened within 24 hours of arrival for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. The Inmate Services Coordinator will house these individuals accordingly." The Auditor reviewed files of current and former inmates for compliance with timeliness requirements and the CCDOC pre-audit report, confirming that inmates are screened for risk of abuse within the first 72 hours. Inmate interviews confirmed they were

asked questions consistent with a screening process on the day of admission. The facility confirmed that 99 percent of the screenings were completed on time. Reason screening would not be completed in the required time period. medical or behavioral isolation due to aggression. The Auditor confirmed the original data in the OAS was incorrect and that the 99% figure is an accurate assessment of the individuals admitted who had a PREA screening completed. Some individuals may be released before the three-day period. The Auditor reviewed 15 randomly selected files on-site and found that 100% of the inmates were screened in a timely fashion.

Indicator (c) The Carroll County Department of Corrections has developed a tool for screening inmates for potential sexual violence or sexual victimization. The tool utilizes information from the inmate's criminal records, other correctional settings, and self-reported information. The intake officer will ask a series of questions at admissions based on the screening tool. They will also gather information from the criminal record database. The facility also has information about how to use the information to inform bed, housing, work, education, and programming assignments. The agency requires that all individuals who complete the screening be trained in how to score and use the information from the tool. Multiple staff members provided the same explanation of the screening process.

Indicator (d) A review of the objective tool used in the Carroll County Department of Corrections shows that it accounts for all ten elements required in this indicator. CCDOC policy, as noted in Indicator (a), defines elements consistent with the standard. Intake staff, nurses, and inmates confirm that the process is conducted individually, away from other detainees, to provide the inmate with the opportunity to disclose any concerns. Randomly selected inmates interviewed support the process, including staff asking them about their feelings of safety in the environment. Medical staff ask some sensitive questions again as part of the process developed by Primecare. This practice allows an inmate with past victimization to disclose to a medical professional who may be perceived as more comforting than a uniformed officer. This also allows for siloing sensitive information about past abuse to a health record, which has limited access. The mental health department will be notified of information on past victimization or perpetrating behaviors. The PREA scoring results are also limited to classifications and facility management. Healthcare staff understood the need to share limited information that might impact the PREA scoring at admission or when they learn about it with the classification officer.

Indicator (e) The Carroll County Department of Corrections tool considers the inmate's history of violence or sexual abusiveness in the community and prior institutional settings. "The Screening tool includes:

- a. review of convictions for violent offenses

- b. History of sexual abuse outside of an institution
- c. History of sexual abuse in an institutional setting
- d. History of institutional violence"

Staff confirmed they consider prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional violence or sexual abuse, as known to the CCDOC, in assessing inmates for risk of being sexually abusive. Individuals who screen as known or potential aggressors are kept away from known perpetrators. Classification staff report that those who are known aggressors will be housed in separate units from those with victimization scores. The facility completes the screening tool based on information obtained at intake and places it in the electronic record. The facility changed the existing form to a two-sided form that captures risk of victimization, risk of aggression, and the reassessment of inmates in the 21st to 30th day.

Indicator (f) The facility's initial review of inmate records did not consistently prove that inmates were being reassessed within the 30-day window since admission. The facility reported they could only verify 71% had completed the reassessment. They had been working to improve these numbers in the weeks leading up to the audit. In interviews, only one inmate denied having a follow-up screening of the individuals who were interviewed and had been in the facility for 30 days. Classification was completed in a separate portion of the electronic form. The facility provided documentation to support these changes. The Auditor was provided a sampling of inmate screenings, which showed that the screenings were completed in a timely fashion. The Auditor suggested making changes to the screening tool, which allowed for more consistent documentation of information necessary to complete a reassessment of risk, including asking about past abuse, the individual's gender identity, and their perception of safety. The PREA Coordinator provided examples of the adjusted forms during the post-site visit period.

Indicator (g). The Lieutenant and the PREA Coordinator confirmed an inmate's risk level would be reassessed when needed. The inmate would be reassessed if they were either the victim or the perpetrator of sexual violence, if they engaged in consensual sex in violation of facility rules, or if additional information becomes known that would affect the scoring. The Auditor confirmed these expectations with the PREA Coordinator, the screening staff, and the medical staff. The CCDOC controls access to responses to questions asked during this screening to ensure that sensitive information is not used to exploit an inmate. The medical record of Primecare is separate from the CCDOC custodial management system. Disclosures made in the Medical or Mental health record are completely siloed from the custody staff. As a smaller facility, it is a limited group of individuals who may know about past trauma events.

	<p>Compliance Determination</p> <p>All inmates have been screened for risk of abuse. The tool covers the elements of indicators (d) and (e). The facility's staff showed the auditor the process by which all inmates are initially scored upon admission. Staff, inmates, and records reviews support that screening occurs. Classification and healthcare staff understood how to share information to ensure inmates' screenings are accurate while protecting any unnecessary disclosure of sensitive information.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Memo describing the use of screening information</p> <p>Screening tool</p> <p>Booking questions</p>
	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Intake Officer</p> <p>Classification Housing Officers Random</p> <p>Staff Random inmates</p> <p>Observation on tour</p> <p>Summary Determination</p>

Indicator (a) The CCDOC makes individualized determinations about how to ensure the safety of each inmate. The PREA screen used at CCDOC provides immediate assistance in determining the appropriate housing unit for any new inmate. If an individual is a known perpetrator of sexual offenses, they would be prohibited from being placed in the same cell as an individual with a known victim history. The Classification Lieutenant will review all screenings. During the site visit, the Auditor learned from the Lieutenant and PREA Coordinator how informed decisions regarding housing are to be made. The Auditor required the development of some documentation describing the decision process for placing individuals in beds, units, work, education, and programming assignments. As a county jail with limited units housing both male and female detainees, the Auditor wanted to ensure housing considerations included steps to protect individuals with known victim history from potential aggressors. The PREA Coordinator and the Classification Lieutenant developed documentation of a plan to protect individuals best if housing on different units is not immediately available. The Superintendent was clear that any imminent risk would be addressed by transferring an individual to another county jail if separation at CCDOC was not possible within the current population. Agency Policy 2 A 121 defines the classification purpose consistent with the standard. "The Facility's Classification protocols are used to promote public safety and institutional order. They provide guidelines for placing inmates at the least restrictive level of supervision required, based on their assessed level of risk, and are designed to provide a manageable, fair, and consistent process for classifying inmates according to their individual, custodial, and program needs. The procedures herein are intended to create Classification protocols that assess each inmate relative to the risk they present to themselves, to other inmates, to staff, and/or to the community. It is based upon a standard set of objective criteria in accordance with all applicable laws and standards."

As a pretrial facility, there are no required therapeutic programs, but individuals can be referred to treatment with mental health staff or can be referred to Starting Point, the local rape crisis agency. In jail, there are limited work positions available to inmates; however, PREA scores could affect their employment opportunities. The CCDOC has provided the documentation described above, which includes cell, housing, work, programming, and education assignments.

Indicator (b) The Superintendent, Classification Lieutenant, and the PREA Coordinator discussed how the facility looks at the safety needs of all individuals at intake and throughout the inmate's stay. Line supervisors support those they monitor, who may be targeted by peers or perceived as easily manipulable. Staff repeatedly stated in interviews that learning the inmate's routine is important so they can identify when behaviors change. The random inmates interviewed supported that staff are approachable, take any threat seriously, and confront negative behaviors, though they don't see much sexual harassment at CCDOC. Interviews with staff also confirm they would act if the inmate voiced concerns.

During the initial screening process, medical staff ask inmates about their perceptions

of safety. The Booking Officer asked 39 questions in the booking process that provide information to complete the PREA Screening tool described in 115.41. Transgender or intersex inmates are also asked about housing and safety needs. Agency policy addresses the concern when it states, "In making housing and program assignments for transgender or intersex inmates, Intake staff will ensure the person's health and safety and determine whether their placement would present management or security problems. The inmate's own views with respect to his or her own safety shall be given serious consideration."

Indicator (c). The Carroll County Department of Corrections has a policy on working with Transgender and Intersex individuals. Policy 4D 200 defines the goals of the CCDOC to ensure a safe and non-discriminatory environment. "In making housing and program assignments for transgender or intersex inmates, Intake staff will ensure the person's health and safety and determine whether their placement would present management or security problems. The inmate's own views with respect to his or her own safety shall be given serious consideration. Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. Inmates identified as LGBTQIA shall not be placed in housing units solely on the basis of such identification or status." There were no intersex or transgender individuals available to speak with during the site visit. The auditor did speak with a self-identified queer individual. The inmate feels safe in the facility from sexual abuse.

Indicator (d) Carroll County would have a multidisciplinary committee meet with Transgender or Intersex inmates upon admission, at six months, or at any significant point between. Since there were no current or recent cases to review, the Auditor spoke with various staff and administration about the process. Policy language covers the expectations consistent with the standard. "Each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate." Discussions with the PREA Coordinator confirm that if a Transgender or Intersex individual were to remain for 6 months, they would have a second multidisciplinary review.

Indicator (e) Absent a case, the Auditor had to confirm with the administration the case-by-case review about the potential housing of transgender individuals at CCDOC. As noted in indicator (b), the policy language supports this process, as did the interviews with the PREA Coordinator and the Lieutenant.

Indicator (f) All staff interviewed randomly knew transgender individuals should shower separately from other inmates. Showers are for individual use in the facility, and the policy addresses this expectation. "Transgender and intersex inmates will be

given the opportunity to shower separately from other persons." The units have single-stall showers for all inmates, but the facility can allow individuals an opportunity to shower during lockdown periods.

Indicator (g) The Carroll County Department of Correction does not, by policy, practice, or legal requirement, house all LGBT inmates in one housing unit. There is no legal judgment requiring such a condition to exist. This was confirmed with interviews with the PREA Coordinator, random staff, and LGBTQI inmates. The Auditor reviewed the population report to ensure that this was not the practice at CCDOC. Policy language states, "Inmates identified as LGBTQIA shall not be placed in housing units solely based on such identification or status."

Compliance Determination

The Carroll County Department of Corrections uses information from inmate screening to protect its staff and reduce the likelihood of assaults. The agency has demonstrated how the information obtained at intake is used across multiple levels within the facility. The documentation and Interviews completed support systems are in place to work with all LGBTQI detainees. The Auditor required a plan that documents the in-place compliance practices. Based on information from interviews with the PREA Coordinator, Classification Lieutenant, Superintendent, and intake staff person, documents reviewed, and agency policy, the Auditor finds the facility in compliance.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4 D 20 Sexual Assault Prison Rape Elimination Act
	Individuals interviewed/ observations made. PREA Coordinator

Superintendent

Classification

Supervisory staff

Summary Determination

Indicator (a) The Carroll County Department of Correction has not housed any individual in involuntary segregation for being an actual or potential victim of sexual assault in the past year. PREA policy 4 D 20 states, "CCDOC'S policy prohibits placing inmates at high risk for sexual victimization in involuntary, segregated housing, unless an assessment of all available alternatives has been made, and it has been determined that there is no available alternative means of separation from likely abusers." Discussions with the Superintendent and the PREA Coordinator confirm that the safety of inmates is a daily consideration. The facility has multiple units and wings that can be utilized to keep individuals apart without resorting to protective custody. Classification and Supervisory staff confirmed that once the aggressor is determined, they would likely result in a forced move. They both confirm that the involuntary segregation of victims is not a practice at CCDOC.

Indicator (b) Discussions with facility administration support. Inmates who are victims or at risk of being victimized would have access to programs, privileges, education, and work opportunities. As noted, they are not to use involuntary segregation to ensure a victim's safety. Suppose the CCDOC restricts access to programs, privileges, education, or work opportunities. In that case, the agency requires documentation of the reasons for the restrictions and imposes regular reviews, including at least every 30 days. The Superintendent reports that his relationships with other county jail administrators would enable them to transfer individuals, further reducing the likelihood of needing protective custody measures. Discussion with staff working in the disciplinary unit confirmed that there have been no cases of individuals being housed for involuntary non-disciplinary protective custody related to Sexual Abuse in the institution. The PREA Coordinator stated that they would consider many other options before placing the victim in any form of restrictive housing.

Indicator (c). As noted in indicator (b), the Superintendent stated that the facility would not want to place any further restrictions on an inmate victim that are not necessary to ensure safety. The preaudit tool initially stated there was one case, but after further review, it was determined that the case was a voluntary request from the inmate. Agency policy language in 4 D 200 requires that, if protective custody is to be used, it must be evaluated at a minimum to determine whether there is a continuing need for separation from the general population."

Indicator (d) As noted in indicator (c), the agency policy covers the requirements. Absent a case to review, the Auditor can only consider the policy statement and administrative descriptions to determine how they would handle such situations.

Indicator (e). Agency Policy states that if someone was involuntarily housed in a form of segregation, the case would be reviewed regularly. Every 30 days, the CCDOC will conduct a review to determine whether each inmate continues to require separation from the general population. The PREA Coordinator confirmed that he would be involved in this process if it were to occur.

Compliance Determination

Absent a case of involuntary segregation at the Carroll County Department of Corrections, the Auditor must base compliance on policy, an understanding of general segregation/protective custody rules, and interviews with staff working the units, Supervisors, the PREA Coordinator, and the Superintendent.

every 30 days. Policy requires "If an involuntary segregated housing assignment is made, CCDOC shall afford the inmate a review every 30 days

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PREA Brochure</p> <p>Inmate Handbook (English and Spanish)</p> <p>PREA Posters</p> <p>Tablet information</p>

Individuals interviewed/ observations made.

Random Inmates

Observations on tour:

Inmate tablets

PREA Coordinator

Summary Determination

Indicator (a) The Carroll County Department of Corrections provides inmates with multiple ways of reporting PREA concerns of sexual assault, retaliation or staff negligence that leads to abuse. The facility encourages inmates to feel comfortable reporting to any staff member, contractor or volunteer, or communicating with outside agencies. The facility provides this information through brochures, posters, handbooks, and an orientation video, all of which emphasize the importance of reporting. All inmates receive a brochure on sexual assault awareness. The Brochure includes information on both internal and external reporting methods. The document suggests consulting a trusted staff member, submitting a medical slip or inmate request, contacting the County prosecutor's office, or writing to the Superintendent or the N.H. Attorney General. Random inmate interviews confirmed that they know there are multiple ways to report a concern within the facility. Inmates report that they can report to, write to, or file a request with any staff member, administration, or submit a formal grievance. Some inmates believed the posted phone number was for someone outside the facility. In contrast, others knew that outside reporting was possible through the New Hampshire Attorney General's Office and the County Offices. Posters posted on the housing units informed inmates about options for reporting internally and externally.

Inmates at the CCDOC have access to tablets. The tablets provide a more confidential way to have a conversation using the unit phones. The PREA Policy 4.D.200 addresses both internal and external reporting methods. "Inmates may report sexual abuse to any staff member or on-duty personnel, or by use of a PREA hotline. Members will accept all reports of staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse." The policy goes on to state, "Persons under CCDOC custody should report any sexual victimization to:

- a. any staff member;
- b. or through the inmate telephone system, by choosing the hotline option available from Securus;
- c. or to medical and/or mental health services;
- d. or by privileged mail to the Superintendent or the Office of the N.H. Attorney General;

e. or by privileged mail to the office of the Governor and/or Carroll County Commissioners."

Inmates confirm that they have access to writing materials and can mail both internally and externally. A review of the inmate handbook lists internal and external addresses and phone numbers for filing a complaint. The Auditor also reviewed information available on the inmate tablets.

Indicator (b) The Carroll County Department of Corrections provides information on how to contact the Attorney General's Office and the County Prosecutor's office if they have any concerns reporting to staff internally. As a pretrial jail, all inmates can also report any concerns to their respective attorneys. Inmates at CCDOC are not detained solely for civil immigration purposes. On the tour, the Auditor found information posted on the housing units. Inmates were aware of these options and stated they could also call attorneys or family members to report a concern. The inmates were also confident that if a family member called to report a concern, the staff would take it seriously and investigate it.

The phone number and contact information for the local rape crisis agency are posted prominently in each housing unit. The Inmate Handbook states that legal and confidential mail to privileged outside agencies will not be read and must be opened in the inmate's presence. "Staff members shall not read for content any privileged or non-privileged mail except when authorized by the Superintendent, and only when reasonable suspicion exists that the mail contains information relating to criminal activity or activity which threatens the safety, security, and the safe operation of the Department. Privileged mail is opened in the presence of the inmate for the detection of contraband." Interviews with inmates confirmed that they are aware of outside options for reporting a concern, including the identified process above or contacting their attorneys or family. The facility postings were clear and easily read and were at a height that individuals with disabilities could easily access. The facility provides tablets to all inmates, not in disciplinary housing. The tablets also double as phones, allowing more confidential calling from peers than a unit phone does. The tablets provide all posted information, the handbook, and the PREA Video. Tablets allow inmates to message any staff in the facility, including the PREA Coordinator and the Investigator. Inmates report that, in most cases, they have never tried to use the phones to report, but they believe the information is recorded. They believed that rape crisis agency staff could come to the facility and meet in a professional visiting capacity, which would be confidential

Indicator (c) Interviews confirmed, consistent with agency policy 4-D-200, that all staff take any report of a PREA-related incident seriously and report the concern to a

superior or to the facility investigator. Random staff knew that they had to report the claim, regardless of the source of information, including anonymous notes. The staff reported that any claim, even if they thought it did not occur, needed to be reported. The staff also confirmed that they were required to file a written report on the claim after giving notice to a supervisor. Finally, the staff also confirmed they had to report on a fellow employee's actions or failure to act, leading to a sexual assault. A review of the various investigative reports completed supported sources, including verbal notifications and allegations from third-party and anonymous individuals. Policy language addresses the staff's expected response. "All reports of sexual abuse shall be accepted from inmates in a private, secure manner. Inmates may report sexual abuse to any staff member or on-duty personnel (4-ALDF-4D-22-7), or by use of a PREA hotline. Members will accept all reports of staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. All forms of reporting, including verbal, written, anonymous, or third-party reports, will be documented immediately on an incident report form. All information related to a sexual abuse report shall be kept confidential."

Indicator (d) The Carroll County Department of Corrections provides inmates at the county jail with several avenues for staff to report a concern of sexual assault or sexual harassment. CCDOC staff interviews reported that if they had a concern about the supervisor or another staff member being involved with a client, they could report it to another supervisor or a higher-ranking individual. The staff reported they can make a report using either the posted phone numbers to a higher-level supervisor or the county hotline number. Staff confirmed that there are no concerns about discipline or retaliation if they have to go outside the chain of command to make a report in good faith. Staff interviews confirmed that they were aware of multiple avenues to report concerns.

Compliance Determination

The Carroll County Department of Corrections staff and inmates interviewed supported that there are mechanisms to ensure an investigation occurs in all allegations of sexual abuse or sexual harassment. Most inmates said they would tell staff and knew they could report on behalf of another inmate or file a concern anonymously. Some inmates stated that they could have family, while others reported their attorney as an option for reporting concerns. Interviews with random staff support, they know they have to report immediately all concerns related to sexual abuse or sexual harassment, no matter the source of the information or the format in which it is received. Staff reported no worries in making reports up the chain of command and felt they could go through other channels if necessary, without consequences if appropriate. A review of the Inmate Handbook and posting further supports that proper information on how to report a concern is readily available to the inmate population. Observations by the Auditor indicate that signage and resource materials in kiosks and tablets provide information on reporting, making it readily

	available. The Auditor tested the phone system to ensure inmates knew how to use it to report a concern. Inmates confirmed the mail process, and the Auditor reviewed processes and record management to ensure confidentiality safeguards. Compliance is based on the staff and inmates' strong understanding of how to report PREA concerns and the importance of acting promptly.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 6-B-100 Grievance Process inmate handbook</p> <p>Investigation files</p>
	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Inmates' Observation on tour</p>
	<p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections is not exempt from the standard; inmates can file a grievance on conditions that violate their rights or prison rules. Sexual misconduct is an acceptable reason for which an inmate can file a grievance. The agency has language on grievances related to sexual harassment and sexual abuse claims in the inmate handbook. The Auditor spoke with the Investigator and the PREA Coordinator to confirm the numbers, as individuals had filed documents that triggered an investigation. The Inmate Handbook defines what concerns can be grieved. "A grievance is defined as a complaint by an inmate of an alleged violation of policy, Constitutional or Statutory Right, or an alleged criminal or prohibited act by a staff member. Grievances may also be used to resolve a condition that exists in the Facility that creates an unsafe or unsanitary living environment."</p>

Indicator (b) CCDOC policy specifies that time limits for normal grievances do not apply in cases of sexual misconduct. "Time limitations for filing grievances are mandatory, except in cases of sexual abuse or sexual harassment, which, grievances in accordance with 115.52 (b)-1 – will be allowed to be filed at any time, regardless of when the incident is alleged to have occurred." The policy does not require an attempted informal resolution of the complaint if it is against a staff person. Request forms related to sexual abuse are treated like an actual formal grievance and will result in an immediate response by the facility.

Indicator (c). Agency policy and Inmate handbooks support the inmate's ability to file a grievance to a person who is not the subject of the grievance. Policy 6-B-100 states, "The Department's policy allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The Department requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint." The PREA Coordinator confirmed the facility will not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. The Lieutenant who receives all institutional grievances also confirmed there is no requirement for inmates to use any informal grievance process or to attempt to resolve an alleged incident of sexual abuse with staff. The Auditor reviewed the language in the inmate handbook supporting this indicator.

Indicator (d) The Inmate handbook sets forth the requirements for response and appeal consistent with the standard. The CCDOC establishes a timeline for resolving inmate grievances that is consistent with the standard. The PREA Coordinator confirmed that all PREA-related complaints are handled immediately, and if the inmate believes they are at substantial risk of sexual abuse, the shift commander must notify the administration immediately. Once the grievance is opened as an investigation, the grievance process is closed. The time frames for this indicator would not be exceeded, as the facility will close the formal grievance once an investigation begins.

Indicator (e) Inmates spoken to by the Auditor confirmed that there is no prohibition on assisting or filing a grievance for another inmate. Staff were also aware they needed to accept all complaints or grievances from third parties. Policy 6-B-100 addresses the indicator's concern, which states, "The Department permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing grievances. If an inmate declines to have third parties to assist in filing his/her grievance, the Department will document the decision by recording the declination as part of the grievance."

Indicator (f) CCDOC has an expedited response process for all grievances where an inmate believes they are at substantial risk of being a victim of sexual abuse. The Auditor confirmed that the PREA Coordinator would be immediately informed of any PREA grievances and that an immediate step would be taken to protect the inmate and engage in any necessary investigations. The Investigator and PREA Coordinator spoke with both and confirmed that investigations into PREA allegations of sexual assault or imminent risk would commence immediately. Policy 6-B-100 states, "An inmate will be allowed to file an emergency grievance alleging substantial risk of imminent sexual abuse. The PREA Coordinator will ensure that inmates who file an emergency grievance receive an initial response within 24 hours of filing. The Superintendent, or designee, will ensure that a final decision on an inmate's grievance alleging imminent sexual abuse will be issued within 5 days." Staff members describe steps to protect an inmate who comes to them with a safety concern. All staff interviewed supported the need for immediate action and the requirement to notify a supervisor.

Indicator (g) Inmates can only be disciplined if, through an investigative process, it is substantiated that the grievance was filed in bad faith. This standard applies to all PREA complaints, regardless of whether they are filed through the grievance process. The PREA Coordinator also oversees the facility's Discipline process. The Auditor did confirm through the review of the inmate handbook that fraudulent statements are considered a significant violation of the facility's disciplinary code (M-119 Fraud p.35)

Compliance Determination

Carroll County Department of Corrections is not exempt from the exhaustion of administrative remedies because it makes available to inmates the use of the grievance system as an option to alert staff to a sexual abuse or harassment situation. After reviewing policy and discussions with the administration, the Auditor confirmed that inmates can and have used the grievance process to file sexual abuse or sexual harassment complaints. The facility reported no formal PREA-related grievances in the past year that led to investigations. The Auditor confirmed with inmates that they could file a PREA-related concern through the grievance process. Inmates reported that they can assist other inmates in completing forms if needed. Inmates reported feeling comfortable telling staff directly about problems, and if they felt it was not addressed, they would send a request to the Lieutenant, Captain, Major, or the Superintendent to discuss their concerns. Compliance determination relied on the policy and interviews with the PREA Coordinator, random inmates who were aware that the grievance process was an avenue to report sexual misconduct concerns. The Auditor also spoke with the investigator and reviewed investigation reports initiated in response to request forms.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>CCDOC Inmate Handbook</p> <p>Inmate Phone system</p> <p>Inmate tablets</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>STARTING POINT Representative</p> <p>Observation on tour</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections Policy 4-D-200 addressed the requirement for individuals to access outside reporting authorities and advocacy groups. The Superintendent will have has entered into a memorandum of understanding with a community domestic and sexual violence agency. Starting Point covers DV and SA victim support across all of Carroll County. The CCDOC provides phone numbers and mailing addresses to Starting Point, County officials, and the State Attorney General's Office. CCDOC does not house individuals for civil immigration issues. The Inmates are informed about the levels of confidentiality upon admission. The agency allows communication via confidential mail or its recorded phone system. Inmates can make calls on tablets, which increases privacy from peers who may otherwise hear conversations if they used the unit phones. Not all inmates were able to tell me whether phone calls would be recorded or not, as they said they had never tried to make that type of call. Inmates were aware that letters were a means of communication and that indigent mail was available for those with no funds.</p>

Indicator (b) All inmates are informed at the inception of services with medical and mental health staff that confidentiality is limited when an individual has been victimized in the institution. There are notices on the phone system informing them which calls are recorded. The posting contains information on how to call the rape crisis agency. The Auditor confirmed with inmates and advocacy organizations that professional visit opportunities would allow for a more open dialogue. The facility has tables for inmates, which improve confidentiality by allowing them to go to their cells or to an area away from peers to make a call. The Auditor suggested they see if calls to the posted PREA numbers can be identified so the calls are not recorded.

Indicator (c) The Carroll County Department of Corrections has a Memorandum of Understanding with STARTING POINT. The agreement is renewable. STARTING POINT is part of the statewide rape and domestic violence coalition (New Hampshire Coalition Against Domestic and Sexual Violence) that works with the Attorney General's office. The MOU with STARTING POINT was signed by the organization's Director, a County Commissioner, and the Superintendent. The current 2-year MOU runs until March of 2026. The Auditor was provided with information about the renewal process.

Compliance Determination

Inmate victims at CCDOC can access victim advocates for emotional support. The agency has entered into a Memorandum of Understanding with the Starting Point to provide support to victims (Indicator (c)). As part of the audit process, the Auditor spoke by phone to a STARTING POINT representative, who confirmed their ability to provide service at the Carroll County Department of Corrections. The PREA Brochure and facility signage included a toll-free number that inmates could access from their phones. The handbook informs inmates that they can call or write to STARTING POINT, which can arrange for professionals to visit the facility. Tablets can also aid in confidential communication with STARTING POINT, the in-house reporting line, the individual's attorney, or the County Prosecutor's Office.

In determining compliance, the Auditor also considered policy language and interviews with STARTING POINT to assess how inmates could identify the confidentiality of communication within the facility, including mail and telephone contacts, and the information posted throughout the facility to rape crisis providers across the state. The inmate PREA education video spends time explaining the role of the rape crisis agency, the types of services provided, and how to access the services. The Auditor also reviewed the Policy on communication by mail to privileged individuals.

Auditor Overall Determination: Meets Standard
Auditor Discussion
<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Agency Website</p>
<p>Individuals interviewed/ observations made.</p> <p>Inmates</p> <p>Phone test completed onsite.</p> <p>postings</p>
<p>Summary Determination</p> <p>Indicator (a). The Carroll County Department of Corrections has developed a mechanism for individuals who want to report PREA concerns as third parties, including fellow Inmates, family, or friends. Information can be obtained/provided in person, by phone, by U.S. mail, or by contacting the CCDOC PREA Coordinator or Investigator. Discussions with inmates support that they have an understanding that the facility will accept a complaint regarding sexual misconduct and investigate, no matter the source. Inmates confirmed that no rules prevent one inmate from reporting a concern for another inmate. The inmates supported the idea that if an attorney or family members reported a concern on their behalf, they were confident the facility would investigate an allegation.</p> <p>The PREA policy set expectations for staff that were confirmed in random interviews with staff. "Staff will accept reports of sexual abuse and sexual harassment verbally, in writing, anonymously, and from third parties, and will promptly document the reports and notify the shift supervisor immediately of same." Postings supporting reporting by all were visible inside the facility. Though staff and inmates were certain that third-party allegations would be investigated, the facility lacked sufficient public information on how to report. Discussions with the Superintendent confirm the expectation and the facilities efforts to get information on to its website. The agency has third-party information on its website on how family or other interested parties could file a third-party complaint through the facility's PREA Coordinator or the facility's Investigator. A review of the website confirms that appropriate information is available to people outside of the institution.</p> <p>Compliance Determination</p>

	<p>The Auditor finds the Carroll County Department of Correction complies with the standard expectations of accepting third-party complaints about sexual misconduct. The facility has systems in place to support third-party reporting, including posting in the facility and information on the county website. Inmates were aware they could make a complaint on behalf of another inmate, and staff were trained to accept all allegations, no matter the source. The Auditor found the posting of information on how to report a concern regarding sexual abuse or harassment of an inmate in the lobby of the facility and on the CCDOC website. Inmates and staff interviewed further supported compliance, as inmates knew they could report on others' behalf and that staff knew they must accept and report all allegations, regardless of the source or their personal belief in the validity of the claim.</p>
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PREA investigations</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Random staff</p> <p>Medical and Mental Health staff</p> <p>Summary Determination</p> <p>Indicator (a) In several parts of the Agency's PREA policy 4 D 200 Prison Rape Elimination Act, staff are directed to report all knowledge or suspicion related to sexual misconduct against an inmate. Policy states, "When a person reports verbally or in writing to any staff member about sexual abuse, sexual harassment, or retaliation, the staff member will immediately contact the shift supervisor who will initiate immediate action to minimize:</p>

- a. further harm to the victim and/or to the person reporting sexual abuse, (if the reporter is someone other than the victim);
- b. any damage to potential crime scenes or evidence.

NOTE: All staff, volunteers, and contractors have a duty to report immediately, any information regarding sexual abuse or sexual harassment known to them.

8. Staff shall immediately report any information related to sexual abuse or sexual assault to the appropriate supervisor or administrator."

Staff understood the expectation around reporting all incidents related to sexual harassment or sexual abuse, as evidenced in random staff questioning. Random staff noted that these notifications would be completed immediately and include when an inmate discloses information about abuse in a prior institution, or even if they do not believe the event occurred. The staff were also clear about the issue of reporting staff misconduct, including actions or inactions that lead to abuse; individuals must be reported. Staff must report all knowledge of retaliation against a staff member or inmate who reports or cooperates in an investigation.

Indicator (b) Staff interviewed were aware of the importance of keeping information disclosed by an inmate to those with a need to know, such as the Supervisor on duty and appropriate medical or mental health staff who may respond. The Auditor asked random staff members about the limitations on sharing information.

Indicator (c) The Medical and Mental Health staff of the Carroll County Jail ensure client confidentiality unless there is a risk that another could impact the safety of individuals. Inmates confirmed that they understand the information shared with medical or mental health professionals is confidential, unless someone is in immediate danger. The Auditor reviewed consent forms that inmates sign upon admission. Inmates spoken with also confirmed understanding that Medical or mental health may be required to report information about an individual who has been victimized or at risk of being abused. Inmate interviews confirm that they understood that if abuse or an individual in harm's way, that information may not be held in confidence.

Indicator (d) The juvenile aspects of indicator d) do not apply, as they are not housed at CCDOC. Crimes against senior inmates or others with developmental disabilities are reportable to New Hampshire's Department of Health and Human Services. Crimes against these protected populations may result in additional charges. It was reported that the Attorney General's Office would potentially become involved in the case. The Auditor reviewed a series of state websites on mandated reporting of vulnerable adults and children. NH State law, 161-F:46 Reports of Adult Abuse; Investigations, defines the individuals, including law enforcement staff, as mandated

reporters.

Indicator (e) All staff are clearly aware that the Superintendent, Major, Investigator, and PREA Coordinator must be called as part of the response plan. Staff reported that the Supervisor running the shift would likely make those calls and that staff would also inform medical staff of the incident. Documentation reviewed in the investigative files supports the assertion that staff refer all information on potential sexual offenses promptly and that the investigative process would begin immediately.

Compliance Determination

Carroll County Department of Corrections policy directs staff in handling a report of Sexual Assault or Sexual Harassment. Random staff interviews confirmed that staff are aware of the immediate need to report all accusations of Sexual Assault or Sexual Harassment, including third-party and anonymous complaints. The staff interviewed knew they also had to report on a coworker whose actions or inactions led to a sexual assault.

All staff, including medical and mental health contractors, were aware of mandated reporting, their legal responsibility to report, and the importance of confidentiality, except when necessary to supervisory personnel or medical personnel to aid in accessing treatment or to facilitate an investigation. The Carroll County Department of Corrections Investigator confirms that crimes against vulnerable adults or individuals with diminished capacities will be reported to the appropriate state agency. Inmates' interviews supported an understanding of the limits of confidentiality that medical or mental health professionals have. Compliance is based on interviews, the policy, and supporting documentation that show investigations are initiated immediately upon knowledge of the incident at the facility. The Auditor also considered the various investigative files to support a quick response by staff to any sexual misconduct allegations.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200 Prison Rape Elimination Act

Individuals interviewed/ observations made.

Superintendent

PREA Coordinator

Summary Determination

Indicator (a) Carroll County Department of Corrections policy 4-D-200 Prison Rape Elimination Act PREA requires the facility staff to take immediate action if someone is at risk. When the CCDOC learns that an inmate is subject to a substantial risk of imminent sexual abuse, staff are trained to take immediate action to protect the inmate. Interviews with the Superintendent and discussions with other management staff confirm there is an immediate response to any situation where physical or sexual harm is imminent. Some staff members knew the importance of quick responses in certain situations. The facility provided an example of the movement of inmates when allegations of actual or potential abuse were found. The Superintendent reports that they will assess both parties and determine the best plan of action. They can easily separate individuals with multiple units, including relocating a known aggressor to higher-security units if needed. The agency has had no incident in the past 12 months where protective measures needed to be implemented to ensure an inmate's safety from sexual abuse. The policy prohibits the use of involuntary segregation as a protective measure unless no other option is available. "CCDOC's policy prohibits placing inmates at high risk for sexual victimization in involuntary, segregated housing, unless an assessment of all available alternatives has been made, and it has been determined that there is no available alternative means of separation from likely abusers.

Compliance Determination

Compliance is based on interviews and the examples provided. Interviews with staff, supported training slides, and immediate measures to ensure inmates' safety. Investigative file reviews also support the immediate response and the separation of individuals who are alleged to have a problem.

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policies and written/electronic documentation reviewed.

Carroll County Department of Corrections Pre-Audit Questionnaire

Policy 4-D-200 Prison Rape Elimination Act

Investigation/ notification

Individuals interviewed/ observations made.

PREA Coordinator

Investigator

Superintendent

Summary Determination

Indicator (a) The Carroll County Department of Correction Policy 4 D 200 Prison Rape Elimination Act/ PREA addresses the requirements of reporting to other confinement facilities of incidents of sexual assault that had occurred in those facilities. "When the Carroll County Department of Corrections receives an inmate complaint of sexual abuse that allegedly occurred at another facility, the Superintendent will notify the head of the facility no later than 72 hours where the alleged sexual abuse occurred in writing, (4-ALDF-4D-22-2), and PREA 115.63 (a)-1 and 2. and, the head of the facility shall immediately notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such allegations will be investigated in accordance with PREA and Department policies." The facility had no allegation of abuse that originated from another facility, and it had to report one abuse allegation to other institutions.

Indicator (b). Interviews with the Superintendent and the Lieutenant in charge of investigations revealed awareness of their responsibilities, including the documentation of notification if they had to notify another facility of the accusation. The Auditor confirmed with the individuals interviewed that they are required to make and document these notifications. The Superintendent reported that emails should be used to follow up on phone notifications. The Investigator provided documentation without an email, in the form of a timeline of notifications to a facility in another state. The Auditor discussed with the investigator, who is new in the position, the importance of keeping verifiable documentation of the notification

Indicator (c). Consistent with the policy statement above, the Carroll County Department of Corrections leadership reported that all notifications to other institutions will occur within 72 hours of the facility becoming aware of an incident.

Indicator (d). CCDOC's PREA policy requires that, upon receiving an allegation that an inmate was sexually abused while confined at the CCDOC, the Superintendent shall ensure that the allegation is investigated. There were no allegations of sexual abuse at CCDOC that were disclosed to staff at another institution.

Compliance Determination

Compliance with this standard was based on the agency policy, the Superintendent's and the Investigator's knowledge of the requirements, and the documentation provided. CCDOC policy addresses the requirements of reporting to other confinement facilities of incidents of sexual assault that have occurred in those facilities.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policies and written/electronic documentation reviewed.

Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200
Prison Rape Elimination Act Review of Investigative files PREA Training slides

Individuals interviewed/ observations made. Random Staff

PREA Coordinator Supervisory staff

Summary Determination

Indicator (a) Policy 3.6.07 Prison Rape Elimination Act (PREA) (page 6) addresses the requirements of the First Responder Standard. "The duties of first responders to a sexual assault are delineated in PREA 115.64 and include the following;

Upon learning of an allegation that an inmate was sexually abused, the first responding security staff member will separate the alleged victim and the abuser and preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.

If the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder must request that the alleged victim not take any action that could destroy physical evidence, including 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 as described above, first responding security staff will ensure that the alleged abuser does not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating." Interviews with random staff reveal that they are aware of the steps required to ensure quick access to care while protecting potential evidence. Staff were able to provide examples of what they had learned about protecting evidence, including closing off the area where the assault occurred and requesting that the individuals involved not eat, drink, brush, use the toilet, shower, or change clothing. The agency has developed a PREA Incident checklist that staff use to ensure that first-responder duties are met. The Auditor spoke with staff to ensure understanding of the expected duties and confirmed these expectations with supervisory staff. The Auditor also reviewed the agency's training slides on first responder duties. There were no incidents where staff were responding to a recent sexual abuse allegation. The investigations support the practice of separating individuals to aid in the investigative process. Random staff interviews confirmed that they received training on first responder duties.

Compliance Determination

The Carroll County Department of Correction has put in place training and resources to ensure all staff know their responsibilities as first responders to incidents of sexual abuse. The agency's PREA policy outlines the steps to preserve evidence and protect the detainee. Compliance determination was based on policy, interviews with staff and supervisors, and documentation from previous investigations and training materials that support first responders in acting consistently with policy directives.

115.65	Coordinated response
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	Auditor Overall Determination: Meets Standard
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Auditor Discussion	
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Policy 7-A-102 Administrative Investigations</p> <p>Emergency binder photos</p> <p>Emergency plan checklist</p>
	<p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Investigator</p> <p>Medical and Mental Health Staff</p> <p>Correctional Officers</p>
	<p>Summary Determination</p> <p>Indicator (a) CCDOC's PREA policy sets forth the requirement of the development of coordination of resources in response to incidents of sexual misconduct. The Auditor reviewed the policy for its content, which provides direction in attachments A-C on what to do. The plan provides key information to facility staff on who needs to be contacted. The Auditor has suggested that the documentation include information on the hospital the inmate would be transferred to for a forensic exam and the contact information for Starting Point, the local rape crisis agency that would send an advocate if, for some reason, medical was unavailable. A copy of the plan is located in the control center's emergency plan binder. Supervisory staff interviewed knew how to transport to a hospital and the value of a rape crisis advocate. Discussions with medical and mental health staff support that they will provide follow-up support upon the return of a victim from a forensic exam. The medical staff confirmed their steps in supporting the individual before hospital transport, including the protection of evidence. The medical staff confirmed they have medical autonomy to determine whether the inmate needs to go out for a medical exam.</p>

	<p>Compliance Determination</p> <p>A review of the plan's elements, along with discussions with facility leadership and staff members in the various identified positions, supports compliance. The administration was able to describe expected steps, including what should occur upon the inmate's return from the hospital. Random staff interviews showed a consistent understanding of their role in the plan, as did discussions with medical, mental health, supervisory staff, and facility leadership. Compliance is based on these interviews, the written plan, the agency's policy, and the evidence in the investigation file, which supports coordinated actions. Since the agency has not had to implement the plan since it was</p>
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<p>115.66</p>	<p>Preservation of ability to protect inmates from contact with abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire.</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Policy 7 A 102 Administration and Management</p> <p>Collective Bargaining Agreement 2023-26</p>
	<p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>Investigator</p> <p>Summary Determination</p> <p>Indicator (a) Discussions with the Superintendent confirmed that the contracts with the union representing the Jail employees do not prevent him from removing the staff person during an investigation into a criminal act, such as PREA sexual assault. The Auditor found language in the policy Administration and Management (7 A 102) that supports placing staff on leave during an investigation. If the allegation against staff is criminal, the policy also requires notification of the New Hampshire Attorney</p>

General's Office. The Attorney General has a Public Integrity Unit that, under state law, can investigate criminal conduct involving staff, contractors, or volunteers. The contract language reviewed by the Auditor did not appear to provide any detrimental language to the ability to remove staff alleged to have committed a sexual assault of an inmate. The contract states, "Suspension with Pay: The County may suspend an employee with pay during an investigation, but a suspension with pay for purposes of an investigation shall not be considered disciplinary in nature. Such employees shall be advised of the nature of the investigation at the time of the suspension."

Compliance Determination

The Carroll County Department of Corrections complies with the expectations of this standard. The Auditor reviewed documentation in policy, interviews with facility leadership, and union contracts to support the ability of CCDOC to keep victims safe from their accused abusers.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy: 4 D 200 Prison Rape Elimination Act Retaliation Monitoring form Individuals interviewed/ observations made. Superintendent PREA Coordinator Investigative Staff Summary Determination Indicator (a) Carroll County Department of Corrections has information on the expectation to monitor individuals after any PREA claims. The agency's PREA policy repeatedly states that alleged victims shall be monitored for retaliation. The information is contained in Policy 4 D 200, which states, "Retaliation is prohibited against any person or staff member who reports sexual misconduct or who

cooperates with a sexual misconduct investigation. Retaliation is subject to administrative or criminal action. The Superintendent or designee shall investigate all reports of retaliation."

Interviews with the Superintendent supported the Deputy Superintendent or the PREA Coordinator (Captain) in monitoring staff, and the Lieutenant will monitor inmates for potential retaliation.

Indicator (b) The Superintendent supported that the facility is large enough with sufficient housing units to ensure individuals who have been separated post a PREA Incident can be safely managed to ensure no retaliation. Inmates would routinely be offered counseling services, and workers would conduct routine check-ins to ensure the client felt safe. The Superintendent confirmed that he would prefer to move the potential aggressor. Since the facility Investigator is also in charge of classification and housing assignments, it is clear that CCDOC has procedures to monitor for retaliation and mitigate risk through housing assignments. The Superintendent and the PREA Coordinator described, in their respective interviews, elements they would consider potential symptoms of retaliation. The items included changes in assignments and disciplinary actions that were not previously in place. None of the 4 cases in the past year required retaliation monitoring, as they were found to be unfounded allegations.

Indicator (c) The agency's policy, as shown in indicator (a) supports all individuals (Inmates and Staff) who report a PREA incident, are monitored for changes in behaviors that might be a symptom of their being retaliated against. CCDOC has a standardized form to be used to ensure consistent application of the review process. The form was adopted during the previous audit period. There had been no substantiated sexual abuse allegation in the prior 12 months to review. The agency is aware that all unsubstantiated sexual assault allegations must be monitored.

The individual completing the form must document whether they have reviewed discipline, if housing moves have occurred or been requested, programmatic or job performance changes, and whether face-to-face communication has occurred or if a mental health follow-up was requested in relation to any of the monitoring concerns. The form provided covers the aspects of the standard indicator. The elements of this indicator are covered also in policy, "The conduct and treatment of persons who report sexual misconduct or who were reported to have suffered sexual misconduct will be monitored by the Deputy Superintendent and the Carroll County Victim's Advocate assigned to the case for at least 90 days following the report of sexual misconduct, to ensure that they were not the victims of retaliation. The monitoring will continue beyond 90 days if the initial monitoring indicates a continuing need. Such monitoring will include periodic status checks by the PREA Victim Advocate. The PREA Investigator and the PREA victim advocate will document their monitoring

responsibilities as part of their investigations and share their findings and observations with the Deputy Superintendent."

Indicator (d) Discussions with the PREA Coordinator supported that check-in would occur with the individual being monitored. The occurrence of status checks can be documented through the newly adopted form. The PREA Coordinator can also consult with mental health if the victim agrees to seek services for support. The PREA Coordinator supported that frequent check-ins would occur. In the initial weeks after an incident, he receives regular/weekly contact with the victim. These contact would lessen over time depending on how the individual is doing in the facility. The Auditor believes this will occur as inmates throughout the facility knew the Captain by name who will be the primary monitor of individuals who file or cooperate in an investigation of sexual abuse. Since Carroll County is a pretrial jail, most victims will likely be discharged before the 90-day period is reached.

Indicator (e) As noted in indicator (b) the facility has sufficient means to protect inmates. The facility's Superintendent supported the facility's ability to protect individuals and hold aggressors accountable. Policy 4 D 200 requires support to any individual who corporates in an investigation. The policy states inmates and staff reporting incidents of sexual abuse will be protected from retaliation from other inmates and staff.

Indicator (f) The Auditor is not required to review this indicator.

Compliance Determination

The Carroll County Department of Corrections has a policy in place to address the elements of this standard. The facility has a monitoring form to document monitoring efforts that initially raised questions on compliance. Since the facility had not formally monitored an unsubstantiated case, the agency has made sufficient changes to ensure compliance moving forward. The standard is compliant based on the information provided, interview statements, the policy, and the adoption of a form that improves the documentation of ongoing monitoring.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed.

Carroll County Department of Corrections Pre-Audit Questionnaire Policy: 4 D 200
Prison Rape Elimination Act

Individuals interviewed/ observations made. Superintendent
PREA Coordinator

Summary Determination

Indicator (a) As noted in 115.43, the Carroll County Department of Correction does not place a victim of sexual abuse into a segregated housing unit. The PREA Audit questionnaire reported no cases of retaliation or protective custody, but after further review. As noted in previous standards, the facility has multiple options to protect an individual who has been an alleged victim of sexual abuse. Agency policy requires that protective custody be reviewed to determine whether it is needed. The Superintendent can also collaborate with other county jails to transfer inmates, ensuring they can remain in as open a setting as possible.

Policy states,

“A. CCDOC’s policy prohibits placing inmates at high risk for sexual victimization in involuntary, segregated housing, unless an assessment of all available alternatives has been made, and it has been determined that there is no available alternative means of separation from likely abusers.

B. If an involuntary segregated housing assignment is made, CCDOC shall afford the inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.”

Compliance Determination

Compliance, without any incident of segregation use post-allegation, is based on policy and discussions with facility management regarding their goal of avoiding segregation to keep individuals safe. The facility offers multiple housing options to accommodate individuals who cooperate in an investigation, ensuring their safety. The Auditor was able to see how the facility responds to allegations, including

	avoiding the use of segregation for prospective victims of abuse in the facility.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200 Prison Rape Elimination Act Policy 7-A-102 Administrative Investigations Policy 7-A-103 Criminal Investigations PREA Investigation files 2024-25 State of New Hampshire Guidelines for Forensic Sexual Assault Case Investigation
	Individuals interviewed/ observations made. PREA Coordinator Superintendent Investigator
	Summary Determination Indicator (a) Carroll County Department of Corrections has trained staff who will be responsible for administrative investigations. Criminal offenses are the responsibility of the county's Sheriff's Office or the state's Attorney's Office. Policy 4-D-200 defines the investigative individual's responsibilities, including the need for a prompt and thorough investigation of the facts and for a complete report outlining the processes undertaken and the reasoning behind the findings. Interviews with line staff confirmed the immediacy of reporting any allegation, regardless of the source or the staff member's personal belief about the validity of the allegation, to the designated authority. The facility Investigator is on call and will respond to accusations promptly when an inmate alleges sexual abuse. An interview with the facility investigator confirmed the internal investigative process and how the facility works with local law enforcement to protect evidence and provide necessary access to staff, inmates,

documents, and cameras to ensure a prompt, thorough, objective, and fair criminal investigation. In the past year, there were four investigations, of which none were referred for criminal investigation. An initial video review by investigators found that the video information disproved the allegation.

Indicator (b) As noted in 115.34, the CCDOC has individuals who have completed a course on Investigations of Sexual Assaults in a Correctional Institution. The facility has an MOU with the Sheriff's Office to complete investigations into criminal cases of sexual abuse or sexual harassment. The Lieutenant, who oversees investigations at the facility, reports that he will call the Carroll County Sheriff's Office for any case in which the initial facts fall between a clear criminal act and one in which the allegation is clearly not criminal.

Indicator (c) CCDOC has trained its staff to protect evidence. The crime scene work and DNA collection would be the responsibility of the County Sheriff's Detectives, whose office is a half mile away. Line staff at CCDOC are also trained to preserve evidence, including securing potential crime scenes and advising victims not to take any actions that could compromise the quality of DNA evidence. As noted in 115.21, a forensic examination of the victim would not occur at CCDOC, but rather at a local hospital with SANE-trained nurses. The investigation file also confirms that interviews with the victim, alleged perpetrator, and witness are conducted routinely as part of the investigation. The investigative files were reviewed. The investigator interviewed described the process they follow to complete an investigation, including how they may consider historical information. The expectations for effective collection of evidence are covered in the state protocol for sexual abuse cases. The Lieutenant reports that information on inmates' prior behaviors in the institution would be provided to the outside investigator if needed.

Indicator (d) The Investigator supports that compelled interviews have not occurred in cases in the past year. The criminal law enforcement agencies would complete compelled interviews. The Investigator was aware that it was essential to communicate with the criminal investigator to ensure that the two investigations did not negatively affect the criminal investigative process.

Indicator (e) The investigator interviewed confirmed that there is no requirement of a victim to undergo any polygraph or other truth-telling process to proceed with an investigation. The investigator shall assess the credibility of an alleged victim, suspect, or witness on an individual basis. He reports that, in an administrative investigation, he examines the evidence provided rather than the status of the individuals involved in determining credibility.

Indicator (f) A review of the investigative materials supports a determination based on the evidence presented. The Auditor was able to see formal statements, formal interviews, and if video was collected and preserved as part of the investigative file. The Investigator confirmed that administrative investigations routinely include a review of staff actions that may have contributed to the incident. The Auditor did recommend that the facility develop a standardized investigation report format. The Auditor reviewed with the PREA Coordinator where information provided during the interview could have been documented in the reports.

Indicator (g). The local Sheriff's, or in the case of staff sexual abuse, the attorney general's PIU will complete criminal investigations at Carroll County Jail. The facility would get a copy of the report through the working relationship. The Sheriff's office would keep evidence such as DNA and other specifics. The facility would also retain copies of staff reports and video evidence in the corresponding administrative investigation.

Indicator (h). The determination of whether to proceed with a criminal investigation will be the responsibility of the Sheriff's Office, which will work with the county prosecutor to determine if the case can move forward for prosecution. There were no cases in the past year that were investigated by the sheriff's office as a criminal complaint.

Indicator (i) The CCDOC has utilized language from this standard indicator in its PREA policy 4-D-200 Prison Rape Elimination Act. The policy states, "The Department will retain all written reports pertaining to the administrative or criminal Investigation of an alleged sexual assault, or sexual harassment for as long as an alleged abuser of an inmate in CCDOC custody is incarcerated or employed by the agency, plus five years."

Indicator (j) Agency policy and the Investigators interviewed confirmed that individuals' departure from the institution would not result in the case being closed. Criminal cases would have to be pursued by the local sheriff's office. The CCDOC Investigator confirmed that he would complete an investigation even if the alleged victim or perpetrator had left the facility.

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

Indicator (I) The CCDOC has an agreement with the Carroll County Sheriff's Office that outlines the relationship, including communication on the investigation and the sharing of the final report. The CCDOC Investigator reports he will be the point person for the Sheriff's Office throughout the investigation.

Compliance Determination

There were four PREA investigations completed in the 12 months preceding the site visit. The Carroll County Department of Corrections ensures that all PREA-related allegations within the DOC are investigated. The trained investigators from the Carroll County Sheriff's Office will conduct any criminal investigations, and the Agency will handle administrative investigations. Policy language includes completing all investigations in a prompt, thorough, and objective manner, setting the standards for evidence collection, the interview process, and coordination with the local prosecutorial authority. The administrative investigative files included the required information in the standard, and the reports allow the reader to understand how the final determination was made. An interview with the facility investigator confirmed the standard of proof, the determination of witness credibility, and that all conduct appearing to be criminal is referred for prosecution. To determine compliance, the Auditor considered the results of the interview with the Investigator and inmates who filed a complaint, the policies in place, and the investigatory files reviewed on-site. Finally, the Auditor also considered random inmates who supported their belief that the facility would investigate all allegations of sexual misconduct.

115.72 Evidentiary standard for administrative investigations	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200 Prison Rape Elimination Act
	Individuals interviewed/ observations made. PREA Coordinator Investigators
	Summary Determination

	<p>Indicator (a). The Auditor confirmed with the investigators that agency and CCDOC policy, 4-D-200 Prison Rape Elimination Act, requires no greater standard than the preponderance of evidence to be used in determining whether an allegation of sexual assault or harassment can be substantiated. Policy states, "A preponderance of the evidence shall be the standard for determining whether an allegation is founded or substantiated ". The Investigator confirmed that the preponderance of the evidence is the standard he uses in determining the outcome of his investigations.</p> <p>Compliance Determination</p> <p>The Auditor relied on interviews with investigators, training records, and a review of investigation case files to determine that the standard is compliant. The agency also has policy language in place to direct investigators on the evidence needed to substantiate findings of a PREA incident. The Auditor and the Investigator reviewed all four allegations of potential Sexual Harassment or Sexual abuse in the past year.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 7-A-102 Administrative Investigations</p> <p>Policy 7-A-103 Criminal Investigations</p> <p>PREA Investigation files</p>
	<p>Individuals interviewed/ observations made.</p> <p>Investigative Staff</p> <p>PREA Coordinator</p> <p>Summary Determination</p>

Indicator (a) The Carroll County Department of Corrections provides notification to all inmates on the outcome of their investigations into sexual misconduct. The Investigator and PREA Coordinator confirmed the notification to inmates regarding whether the allegation was substantiated, unsubstantiated, or determined to be unfounded. An interview with the Investigator supports that he comes to one of these three conclusions in all sexual abuse or sexual harassment cases in administrative investigations. The Investigative files contain documentation supporting the notification, and the Auditor provided suggestions to improve it. Policy 4-D-200 directly addresses the indicator when it states, "In accordance with PREA standard 115.73, the inmate who has made a claim of sexual abuse will be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following the investigation." There were 4 allegations that resulted in investigations, and the Auditor's review of the documents found documentation supporting inmate notification.

Indicator (b) Carroll County Department of Corrections will complete administrative investigations, and the County Sheriff's Office will complete criminal investigations into allegations of sexual misconduct. The Lieutenant serves as the lead internal investigator for CCDOC. Interviews support the conclusion that he would be in communication with law enforcement in criminal cases to ensure the required notifications could be made. There were no cases in the investigations completed in the past year that resulted in a formal criminal investigation. The administrative investigations support indicates that there is communication between agencies regarding cases that may constitute potential criminal acts.

Indicator (c) As noted in indicator (b), the Lieutenant was aware that if the accused perpetrator of sexual abuse is a staff person, contractor, or volunteer, the alleged victim is notified if the individual has been removed from areas where they would come in contact. They were also aware if the staff member is no longer employed at the CCDOC. They will remain informed about the criminal case proceeding to notify the victim if the staff member has been convicted on a charge related to sexual abuse at the facility. Agency PREA policy 4-D-200 states the following;

"Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the Department will subsequently inform the inmate (unless the agency has determined that the allegation is unfounded), whenever:

1. The staff member is no longer present within the inmate's unit.
2. The staff member is no longer employed at the Facility.
3. The Department learns that the staff member has been indicted on a charge related to sexual abuse within the Facility; or
4. The Department learns that the staff member has been convicted on a charge

related to sexual abuse within the Facility."

The facility created a form to document the various notifications to an inmate. The form can be used to notify them of the investigation outcome, including whether the alleged perpetrator has been removed from contact with them, whether the individual has been referred for prosecution, and the outcome of these events if they occur while the potential victim is still in custody.

Indicator (d) The facility also reports that, following an inmate's allegation that another inmate has sexually abused him or her, the CCDOC will inform the alleged victim whenever it learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. The policy language shown in indicator (c) confirms the expectation. There were no cases of inmates, staff, or volunteers who were indicted or convicted in the past year. "If the Carroll County Sheriff's Office, the N.H. If State Police or the Office of the Attorney General conducts such an investigation, the Department will request relevant information from the investigative entity to inform the inmate of the investigation's outcome. Following an inmate's allegation that another inmate in the Facility has sexually abused him or her, the Department will notify the alleged victim whenever it learns that the alleged abuser has been indicted on a charge related to sexual abuse within the Facility; or the when the Department learns that the alleged abuser has been convicted on a charge related to sexual abuse within the Facility."

Indicator (e) The facility currently documents notifications in the investigative files.

Indicator (f) The Auditor is not required to audit this provision.

Compliance Determination

The Auditor reviewed documents in investigative files that support the occurrence of inmate notifications. Clients who had made PREA allegations confirmed they were notified of the outcome. The Auditor finds the facility in compliance with the standard, based on policy, the documentation provided, interviews with the investigator, the PREA Coordinator, and inmates who had previously filed PREA allegations. The Auditor also considered the form used to document the various notifications to the victim.

<p>Auditor Overall Determination: Meets Standard</p>
<p>Auditor Discussion</p>
<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 7-E-106-Employee Separation</p> <p>CCDOC Employee Handbook</p>
<p>Individuals interviewed/ observations made. Superintendent</p> <p>PREA Coordinator</p>
<p>Summary Determination</p> <p>Indicator (a) CCDOC policy, 4-D-200 Prison Rape Elimination Act states that staff who violate agency sexual abuse or sexual harassment policies are subject to disciplinary action. Disciplinary actions, including termination, will be presumed consequences for a substantiated finding of sexual abuse. "No individual under the supervision or custody of the CCDOC can legally consent to engage in any type of sexual conduct with a staff member as defined in this policy. Any staff member who engages in the sexual activities as defined in this policy will be subject to an administrative and, if deemed appropriate, criminal investigation, the results of which may include discipline up to and including employment termination and criminal prosecution." The Auditor confirmed with the Superintendent that staff can be terminated for serious violations on the first offense. The Employee Handbook defines behaviors in its sexual harassment section. "Sexual misconduct is strictly prohibited. Sexual misconduct is defined as all sexual behavior directed toward an inmate in custody. This includes acts or attempts to commit acts of sexual contact, sexual abuse, and sexual harassment. Further, sexual misconduct includes conversation, speech, or correspondence that demonstrates or suggests a romantic, sexual, or intimate relationship between an inmate or corrections employee (including Contract Employees and Volunteers). All sexual contact between these persons is sexual misconduct regardless of consent. If an employee's conduct violates the sexual misconduct policy, such conduct will result in disciplinary action (including termination) and may result in criminal prosecution." Policy 7-E-106 confirms the Superintendent's ability to place an employee on leave during an investigation or in an alternative position to prevent contact with an alleged inmate victim.</p>

Indicator (b). As stated in indicator a), the CCDOC policy confirms that termination is the presumptive disciplinary sanction for staff who engage in sexual abuse or sexual misconduct with inmates. In their interviews, both the Superintendent and the PREA Coordinator were very clear that such behavior would not be tolerated. There were no cases of staff terminations in the past year for sexual misconduct.

Indicator (c). Disciplinary sanctions for violations of CCDOC policies relating to sexual misconduct not equaling a criminal act but covered under the Prison Rape Elimination Act could result in suspensions, demotions, requirements of additional training or terminations, reportedly. A review of the employee handbook makes it clear that progressive discipline is not required when the document states, "Violation of any staff rules may result in discipline, including dismissal or criminal prosecution. The list of non-criminal acts for which an employee may be terminated or receive correct discipline includes:

- discrimination
- inappropriate gestures
- improper communication with an inmate
- improper conduct in the presence of an inmate
- undue familiarity with an inmate or family member

There was no disciplinary action taken against staff for actions in the past year that were not criminal. The PREA Coordinator and Superintendent confirmed that there is a range of staff discipline and that all investigative facts would be considered.

Indicator (d). All terminations for violations of CCDOC sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, unless the activity was clearly not criminal, and to any relevant licensing bodies. CCDOC would work with Prime Care on any substantiated allegations against the medical staff. All criminal acts are reported to the local Sheriff's Office, even if the employee has quit/separated. Correctional Officers in the State of New Hampshire are certified, and terminations for sexual misconduct are reported to the board, which can revoke certification, making it impossible for the person to work in corrections in the state.

Compliance Determination

Absent a current case of staff sexual misconduct, compliance with this standard was based on agency policies, interviews with the Superintendent and PREA Coordinator, and the policies in place.

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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>NH AG website regarding the PIU.</p>
	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Health Services Administration</p> <p>Medical / mental health staff</p> <p>Volunteers</p>
	<p>Summary Determination</p> <p>Indicator (a) Policy 4-D-200 definition of sexual abuse and sexual harassment includes acts performed not only by CCDOC staff but also by contractors or volunteers. In discussions with the Superintendent and the PREA Coordinator, the CCDOC will take immediate measures upon any allegation of sexual misconduct by contractors or volunteers. Depending on the findings, the facility will suspend access until the investigation is completed and will consider whether to prohibit further contact with inmates. The documentation provided in the pre-audit tool supports that there have been no incidents of sexual misconduct by contractors, volunteers, or interns. Policy 4-D-200 goes on to state, "Any contractor or volunteer who engages in sexual abuse will be reported to the office of the Attorney General, and to relevant licensing bodies,</p>

unless the activity was clearly not criminal." The NH Attorney General has a unit that can investigate staff, contracted staff or volunteers who violate public trust. The Public Integrity Unit (PIU) can investigate any criminal actions against an individual in the custody of the state or local government. The Auditor spoke with contracted staff and volunteers, who all understood that sexual misconduct toward an inmate may result in immediate cessation of access to the complex and could result in criminal charges.

Indicator (b). As noted in the previous indicator, CCDOC policy supports that the facility will take remedial action in determining whether to prohibit further contact with inmates by individuals in the standing groups. The Superintendent confirmed the ability to place contractors, volunteers, or interns who engage in sexual misconduct out of the facility during an investigation. If the investigation finds no criminal behavior, the facility will still have to consider whether the person should have contact with inmates based on that information.

Compliance Determination

The Carroll County Department of Corrections has not had an incident of sexual misconduct by a contracted staff member or a volunteer in the past year. Absent an incident of sexual misconduct by a contractor or volunteer, the Auditor had to base the compliance determination on policy and interviews with facility management, contracted individuals, and several volunteers. The PREA confirmed they would immediately halt access to any individual alleged to have engaged in sexual misconduct with an inmate.

115.78 Disciplinary sanctions for inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy: 4-D-200 Prison Rape Elimination Act Policy 3-A-101 Inmate Discipline Carroll County Inmate Handbook

Individuals interviewed/ observations made.

Investigative Officer

Superintendent

PREA Coordinator

Inmates

Summary Determination

Indicator (a) Inmates who have been found to have engaged in a criminal offense, including sexual assault, are not only subject to criminal prosecution, but they are also referred for a facility disciplinary hearing. CCDOC has policy 3-A-101, Inmate Discipline, which defines a formal institutional process for addressing misconduct in the facility. " Inmates who violate PREA are subject to disciplinary sanctions after the Department's administrative process finds that an inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse." Criminal acts, including sexual abuse, may also result in formal discipline through this process. The inmate handbook defines the different levels of discipline for different types of sexual misconduct. The Inmate Handbook defines various behaviors that could fall under major rule violations, including M-110 Engaging in a Sexual Act. The pre-audit questionnaire reports that there have been no incidents in the past year that have resulted in a referral for formal discipline for an inmate-on-inmate sexual abuse.

Indicator (b) After a case is referred for discipline, there will be a multi-level process for review of the sanction from the initial hearing officer to the Captain, and it can be appealed to the facility Superintendent. This was confirmed in the Superintendent's interview. The Inmate handbook states the Superintendent will review discipline to ensure due process, adequate evidence to sustain the findings, and "the penalties assessed are appropriate. (Determination will be made as to whether the sanctions assessed are appropriate for the violation and consistent with similar violations. The Superintendent may not increase sanctions, but may revise them downward. "

Indicator (c). The Captain confirmed that he considers an inmate's mental disabilities or mental illness that might have contributed to his or her behavior before determining what type of sanction, if any, should be imposed. He reports that each case is reviewed individually, and patterns of similar previous behaviors may result in greater consequences. Interviews with the Superintendent confirmed the expectation

that mental disability should be a factor in determining if an individual should be disciplined. The agency discipline policy 3-A-101 sets forth expectations on the mental capacity of the aggressor to understand their actions. "The Disciplinary Officer will obtain input from mental health staff before imposing sanctions on an inmate who displays signs of mental illness or retardation."

Indicator (d) CCDOC inmates have access to Mental Health Services at the facility. CCDOC has a qualified mental health practitioner to provide diagnostic services in emergent and non-emergent situations. As a pretrial facility, the Carroll County Department of Correction does not impose mandatory treatment for those who engage in sexual misconduct in the facility. The disciplinary committee has various options to impose upon a person who engages in sexual misconduct, but mandatory counseling is not one of the listed items.

Indicator (e) The investigative staff and facility PREA Coordinator confirmed inmates who engage in sexual misconduct with staff would not be disciplined unless it is proven the staff did not consent. The CCDOC may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. There were no cases in the past year of staff and inmate-substantiated sexual encounters that resulted in discipline. Agency PREA policy 4-D-200 addresses this indicator. "Inmates who have sexual contact with staff may be disciplined only upon a finding that the staff member did not consent to such conduct. "

Indicator (f) The PREA Policy 4-D-200 states that an inmate cannot be disciplined for a PREA allegation unless it is proven that the allegation was filed in bad faith. The Investigator confirmed that they must conclude this before the inmate would be subject to discipline. The Auditor's review of the handbook revealed that inmates could be disciplined for sexual misconduct and for lying during an investigation. Major misconduct events can result in disciplinary restrictions, loss of privileges, and loss of good time. There were no cases in which an inmate was disciplined for making a PREA allegation in bad faith. Policy states, "A report by a person/inmate of sexual misconduct made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation did not establish evidence sufficient to substantiate the allegation."

Indicator (g) Inmates who engage in consensual sexual misconduct can be subjected to discipline as defined in the handbook. The CCDOC prohibits all sexual activity between inmates and may discipline inmates for such activity. Policy language in 4-D-200 states, "Inmates who have sexual contact with staff may be disciplined only upon a finding that the staff member did not consent to such conduct." Inmates interviewed understood any sexual behavior is subject to discipline.

	<p>Compliance Determination</p> <p>The Carroll County Department of Corrections policies and the Inmate handbook cover many of the requirements of the standard. Inmates are provided information on the offenses and the consequences for each act in their handbook. English and Spanish versions of this document are available on the tablets. If the inmate has impairments, the discipline committee can refer the case to the mental health unit. Absent a discipline related to sexual misconduct, compliance is based on the policy, documentation from the inmate handbook, interviews with the investigator and PREA Coordinator, and the Superintendent.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PrimeCare Policy J-F-06 Response to Sexual Abuse</p> <p>Policy 4-C-101 Medical Services</p> <p>PREA Screening Forms</p> <p>Nurse screening Questions and referrals</p> <p>Individuals interviewed/ observations made.</p> <p>Medical Staff</p> <p>Mental Health Staff</p> <p>Inmates</p> <p>Classification Supervisor</p> <p>Observation of the medical unit</p> <p>File reviews</p>

Summary Determination

Indicator (a) The facility is not a prison.

Indicator (b) The facility is not a prison.

Indicator (c) Inmates who engage in sexual assault or have a history of sexual offenses are automatically referred to Mental Health for an assessment. When a screening indicates an inmate has previously been a victim of sexual abuse, whether it occurred in an institutional setting or in the community, the classification staff or medical staff will ensure that the inmate is offered a follow-up meeting with a mental health practitioner. This meeting will occur within 14 days of the intake screening, reportedly. Page 14 of PREA policy 4-D-200 sets forth the expectation consistent with this indicator. "Those inmates who have disclosed any prior sexual victimization during screening will be offered a follow-up meeting with a medical or mental health practitioner." The Auditor spoke with the mental health clinician who reports she will see individuals before the 14th day in custody, and if they do not want to pursue treatment for the past abuse, he reminds them of the services of the local rape crisis agency. Discussions with the mental health professional confirm that he receives electronic notifications in the medical records when a new person is identified.

Indicator (d) The Auditor confirmed through interviews with medical staff, mental health staff, the Classification Lieutenant, and the PREA Coordinator that sensitive information is protected. Custody staff do not have access to information in the medical or mental health records. Information obtained and documented in the intake/screening process is also limited in access to those individuals who need to know. The Healthcare Staff reported that they discuss the limits of confidentiality with the inmates at the inception of services. Inmates interviewed supported that information given to counseling staff is kept confidential. Because of the size of the facility, the facility is able to limit knowledge of individuals' past sexual abuse histories to a very limited number of administrative staff or health care staff. The Lieutenant, who is the head of classification, can manage housing and work decisions. As a pretrial facility, there is limited programming or education.

Indicator (e) All inmates meet with medical staff and receive an understanding of the limits of confidentiality related to criminal behaviors. Nurses report this is completed at intake. Medical and Mental Health staff support, they routinely reiterate the limits with clients during each service session. Inmates interviewed confirmed that they had signed acknowledgment forms and verbally understood why medical or mental health staff must disclose actual sexual abuse or imminent risk situations. The CCDOC health

Service staff will not disclose information about prior non-institutional abuse, and the facility does not serve individuals under 18. PrimeCare policy addresses the indicator when it states the following:

"The federal standards require that medical and mental health practitioners report allegations or incidents of sexual abuse that occurred or may occur in a facility, and unless precluded by federal or state law. The situation in which a patient discloses previous sexual victimization in the community to a medical or mental health practitioner is different. In that situation, the patient has a right to determine how, or if, the medical or mental health practitioner may share the information with other staff and requires that the practitioner obtain informed consent before sharing this information with staff making housing programming, education, and work decisions."

The Auditor confirmed that information that could affect the accuracy of PREA screening could be shared with the classification supervisor without providing any specific information about past abuse.

Compliance Determination

The Carroll County Department of Corrections provides Medical and Mental Health Services staff at the County Jail. All individuals complete a screening with both classification and medical staff upon admission. The health care staff confirmed that individuals identified with prior histories are offered Mental Health services. The facility limits access to information on abuse histories and offers mental health services, and educates the inmate on STARTING POINT, the local rape crisis organization, for ongoing support. CCDOC provides confidential health records separate from the custody files. Critical information that could be used against a victim is secured in the health record. Interviews with Mental Health and Medical staff confirm that all inmates are notified about the limits of confidentiality at service initiation. To determine compliance, the Auditor took into consideration the policies, interviews with Medical and Mental Health staff, and the random inmates' understanding of confidentiality.

115.82 Access to emergency medical and mental health services	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed.
	Carroll County Department of Corrections Pre-Audit Questionnaire
	Policy 4-D-200 Prison Rape Elimination Act

PrimeCare Policy J-F-06 Response to Sexual Abuse

Sample EMR Task referrals to Mental Health

New Hampshire state law RSA 21-M:8-c (payment of forensic services)

New Hampshire AG's Guidelines Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation

Individuals interviewed/ observations made.

Medical Staff

Mental Health Staff

Inmates

PREA Coordinator

Local hospital representatives

Observation of the medical unit

Summary Determination

Indicator (a) The Carroll County Department of Correction has a medical clinic that operates 7 days per week with Registered Nurses and after-hours availability of on-call medical and mental health practitioners. The services are diverse and consistent with community health clinics. Inmates report access to these services if they are in crisis. Medical staff report having medical autonomy if the inmate must leave the building for emergency services, such as forensic exams, to facilitate that trip. The medical staff states that the facility administration is supportive of their work and works to resolve issues when they arise. In the event of a sexual assault, inmates at CCDOC would go to one of the area hospitals with trained nurses trained in forensic exams and support from the local rape crisis agency, Starting Point. Policy 4-D-200 Prison Rape Elimination Act and PrimeCare Policy J-F-06 Response to Sexual Abuse requires medical staff to provide immediate access to emergency medical services, including transfer to a hospital for a forensic exam. "If a patient discloses an incident of sexual abuse that occurred within five (5) days (120 hours), physical evidence may still be collected; the patient should be sent to the Emergency Room for examination and collection of any forensic evidence." The policy goes on to state, "Victims of sexual assault are either referred to a community facility for treatment and gathering of evidence, or the following guidelines/actions must be taken:

1. NO shower or washing. Do not allow them to urinate, defecate, smoke, eat, drink, brush hair or teeth, or rinse their mouths.
2. A history must be taken, and a CCDOC-qualified health care provider will conduct an examination to document the extent of injury. Upon evaluation of the information obtained during the history and examination, a determination should be made as to whether referral to another medical facility is appropriate. With the victim's consent, the examination shall include the collection of evidence, using a kit approved by the local legal authority.
3. The patient must remain in the medical department until transferred to the designated hospital emergency room. CCDOC staff shall document the time of departure, mode of transportation, escort, and condition.
4. The facility should make a victim advocate available to accompany the inmate through the forensic medical exam process."

Discussions with the hospital and confirmed their knowledge of the New Hampshire Attorney General's Guidelines Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation. Medical and Mental health staff will keep confidential records of their treatment steps separate from the inmate's custody files.

Indicator (b) Medical services are available 7 days per week at the Carroll County Department of Corrections. Random staff members were aware, as part of their first responder duties, that immediate notification to medical staff was required. If medical staff are not on duty, staff have access to on-call practitioners who will be consulted regarding the need to transport. All staff interviewed described their first-responder duties, which require them to immediately involve the medical team. Interviews with the Shift Commander and line staff confirm that they are aware of the procedures for protecting evidence when medical staff are not present in the building, as well as the importance of transporting the individual to a hospital for a forensic examination. Policy 4 D 200 reminds staff of the need to ensure the victim's safety. "All offender victims should be escorted to Health Services until a medical and mental health assessment can be conducted. This will allow time for the determination of appropriate housing that ensures the safety of the victim and isolation from the perpetrator(s)."

Indicator (c) Discussions with both Hospital staff and facility medical staff confirm that sexual assault victims would be offered prophylaxis medications and emergency contraception. The Auditor confirmed that the same medications would be offered to the inmate again upon return from a forensic examination, even if they initially denied them. Medical staff confirmed that they would educate the inmate on the importance of these medications for maintaining their health. New Hampshire's Attorney General's Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation recommends the use of prophylaxis medications for STD and pregnancy

contraception options. PrimeCare policy J-F-06 also addresses this indicator when it states, “prophylactic treatment and or emergency contraception as well as follow-up for sexually transmitted or other communicable diseases will be offered to the victim as clinically indicated.”

Indicator (d) The Auditor confirmed that medical services related to sexual assault victims are provided without cost. CCDOC policies address the fact that services will be provided at no cost. The Auditor also confirmed that victims of sexual assault can be provided with initial and follow-up services at local hospitals through funding from the state. This is done to encourage all victims to come forward for help. The clinic at CCDOC would operate in a similar manner by providing follow-up care. The New Hampshire Department of Justice covers the state's obligation through the state's Victim Compensation Program to ensure payment for forensic exams and related treatment for victims of sexual assaults. Pages 61-65 of the Attorney General's protocol inform the medical provider how to file for reimbursement of services provided to victims of sexual assault. The various coding options clearly state no cost to the victim or their insurance provider. CCDOC policy also addressed this indicator. “If the victim agrees to a forensic examination, transfer to a hospital or medical treatment, they may request that a victim advocate, qualified agency staff member, or a qualified community-based organization staff member accompany the victim through the forensic medical examination process and investigatory interviews. These treatment services will be provided to every victim without financial cost, and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

Compliance Determination

The Carroll County Department of Corrections can quickly respond to and provide emergency care, as well as refer individuals to a local hospital for forensic services located just 7 miles away. The Carroll County Department of Corrections has a response plan that outlines the steps taken to ensure access to care. The CCDOC has on-site medical and nursing staff available seven days a week. The facility also has on-call providers who can help facilitate referrals to outside medical providers. Medical staff will automatically send for any victim of abuse that has occurred in the previous 96 hours. CCDOC staff will follow the requirements as outlined in Policies 4D-200 and JF-06. The local hospital confirmed that it has trained nurses in forensic exams, although they may not have certifications as SANEs. As part of the audit process, the Auditor spoke to a community representative to confirm access to forensic exams and the services provided to victims of sexual assault. There is no financial cost to any inmate in DOC. The Auditor reviewed the State of New Hampshire website to confirm this. The compliance determination took into consideration access to services, CCDOC policies, interviews with healthcare staff, and information from the State of New Hampshire regarding forensic exam requirements.

115.83	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PrimeCare Policy J-F-06 Response to Sexual Abuse</p> <p>Policy 4 C 101 Continuum of Health Services</p> <p>New Hampshire AG's Guidelines Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation</p> <p>Documentation of EMR referral to Mental Health staff</p> <p>Individuals interviewed/ observations made. Medical Staff</p> <p>Medical Staff</p> <p>Inmates</p> <p>Starting Point Representative</p> <p>PREA Coordinator</p> <p>Observation of the medical unit</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections ensures that all inmates are provided with the appropriate level of medical and mental health services for any issues of sexual abuse. Health staff will provide the appropriate level of care depending on how long ago the abuse occurred. If the incident occurred within the prior 96 hours, the inmate will be offered a forensic examination at a local hospital. If the incident is a prior-life event that occurred at another institution or in the community. The medical and mental health teams will conduct a comprehensive health assessment and provide a mental health referral for services. If the inmate was more comfortable discussing the abuse with a rape crisis agency staff, a mental health referral can be made to Starting Point, the local rape crisis agency, to provide</p>
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the appropriate supportive counseling. Policy J F 06 states, "if a patient discloses prior sexual victimization and abusiveness, whether it occurred in an institutional setting or in the community, a referral will be made to have the patient seen on the next mental health line for further evaluation." The Policy goes on to state, "If a patient discloses an incident of sexual abuse that occurred within 96 hours, physical evidence may still be collected; the patient should be sent to the emergency room for examination and the collection of any forensic evidence."

Indicator (b) Inmates who are victims of sexual assault at CCDOC are immediately referred to mental health services as well as medical services. Even if the assault occurred in the community or at another county jail, the inmate, once identified, is referred to health services staff for follow-up services. If the inmate prefers, they can be referred to the local rape crisis agency for support services post an incident of sexual misconduct. The Medical and Mental Health staff, as well as the STARTING POINT representative, confirmed that they would make referrals to ensure continuity of care if the inmate were released home or transferred to another facility. Health policy J-F-06 describes the expected response of medical and mental health staff during a sexual assault incident and upon the inmate's return to the facility from a forensic exam. "Upon return from the emergency room, PCM healthcare staff shall document time of return, mode of transportation, escort, and condition, physical and behavioral. PCM staff shall also note and confirm any follow-up orders. PCM staff will assess the patient for any suicidal/homicidal ideations. If the patient presents as suicidal or homicidal, they will be placed on suicide watch and seen on the mental health line."

Indicator (c) As noted in indicator (a), the medical clinic at the Carroll County Department of Corrections facility is equivalent to a community medical clinic found elsewhere in the county. The facility offers a full array of medical and mental health services and can refer individuals out to specialists if needed. As a pretrial jail, most inmates are only in custody for a short period of time. The infirmary addresses the needs of illnesses associated with the broad age range at CCDOC. The facility provides mental health services, including counseling, medication management, and, when needed, the extra support of the smaller housing unit or close observation room. The Auditor confirmed that medical staff will refer all individuals who report abuse to the mental health provider, which confirmed that it receives these notices electronically as to-do tasks in the EMR.

Indicator (d) (e) Interviews with facility health services staff and local hospital staff both confirm that the victims of sexual abuse would be offered pregnancy testing. Statewide protocol confirms that all-female victims would be offered policy. Medical staff at the hospital confirmed that pregnancy testing is offered. Nursing staff also confirmed the ability to provide pregnancy testing requirements, education on emergency contraception, and access to prophylactic medications at the jail if the

victim had previously refused at the hospital.

Indicator (f) The Auditor confirmed with both the medical staff at CCDOC and the representatives of the local hospital used by CCDOC that victims of sexual assault are offered testing for sexually transmitted diseases. This testing is provided free of charge, consistent with agency policy. Medical staff confirmed that if the inmate refused this service in the hospital, they would be educated upon return about the service and offered it again if appropriate. The Auditor confirmed that the facility can coordinate any follow-up treatment, if indicated, upon discharge.

Indicator (g) Treatment services are provided to victims of sexual abuse without cost to the inmate, including if the inmate must go out for a forensic exam. New Hampshire has a victim's compensation fund that will absorb the cost of the exam. This is reportedly done to ensure finances are not a barrier to victims seeking treatment. As noted in the previous standard, the New Hampshire Attorney General's office oversees funds to hospitals to ensure victims of sexual abuse can come forward without the worry of financial burden.

Indicator (h) NA the facility is a Jail

Compliance Determination

Policy 4-D-200, the Prison Rape Elimination Act, Health Care Policy J-F-06, Response to Sexual Abuse, and Policy 4 C 101, Continuum of Health Services, all address aspects of this standard. The availability of Starting Point (local rape crisis service) allows for ongoing treatment services if they prefer to use them instead of the onsite mental health staff provided by CCDOC. Through contracting with rape crisis centers, the CCDOC has opened the inmate victims to resources post-release. The services provided by the community hospital, the facility, and contracted service providers ensure that inmates at the CCDOC receive equitable services comparable to those offered to victims in the community. CCDOC and Prime Care Medical Group provide access to qualified Medical and Mental Health professionals' services on call, evenings, and weekends. Discussions with representatives of local hospitals also ensure that appropriate testing and forensic services will be made available to victims from the Jail. Compliance is based on the resources available at the jail and in the community-based services, as well as interviews with medical and mental health staff, and representatives of Starting Point and local hospitals, to ensure appropriate support for care.

<p>Auditor Overall Determination: Meets Standard</p>
<p>Auditor Discussion</p>
<p>Policies and written/electronic documentation reviewed.</p>
<p>Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4 D 200 Prison Rape Elimination Act</p>
<p>PREA Investigation Cover Sheet</p>
<p>Investigation files</p>
<p>Incident Review Form</p>
<p>Individual Interviewed/ Observation</p>
<p>Superintendent</p>
<p>Major</p>
<p>Investigator</p>
<p>PREA Coordinator</p>
<p>Medical and Mental Health staff</p>
<p>Summary Determination</p>
<p>Indicator (a) In the past year, the facility has not had an allegation of sexual abuse that was substantiated or unsubstantiated. The Carroll County Department of Correction policy 2D-200 mandates and defines the purpose of the review, potential participants, and required content. The policy states, "All cases of sexual assault will be evaluated by the PREA Sexual Assault Resource Team (SART) or by a subcommittee of that group. All of the following CCDOC disciplines should be represented at all case review sessions: Investigations, Medical, Mental Health, and Victim Services Advocate, and (if applicable) Community Crisis Center Advocates. In some cases, the NH State Police, the NH Office of the Attorney General, and other professionals involved in the case may also attend. For purposes of this definition, a report of the findings and recommendations for improvement will be submitted to the CCDOC Superintendent or designee and the PREA Coordinator. Cases will be reviewed using the six criteria outlined in Federal Statute." In addition to the policy language in place, the member described in the policy confirmed that they would be part of any critical review after a sexual abuse at the Carroll County Jail.</p>

Indicator (b) The Auditor reviewed the policy, which sets forth the timeline for a post-investigation review. "A sexual abuse incident review shall take place within 30 days of the conclusion of every sexual abuse investigation, unless the allegation was determined to be unfounded. The PREA Coordinator/Safety and Security Captain will prepare a report of the findings and recommendations for improvement and submit those findings to the Deputy Superintendent and the Superintendent." Interviews with the facility's administrative team confirmed that they are aware of the timeliness requirement for this indicator.

Indicator (c) In the absence of an actual event, the Auditor confirmed in discussions with medical, mental health, investigators, and administration that there would be a critical incident review occurring on all cases of sexual assault. The Auditor reviewed the policy that sets forth the requirement. "The Facility will explore participation in a multi-disciplinary Sexual Assault Review Team (SART), in an effort to develop Quality Improvement outcomes." Interviews with the Superintendent and the PREA Coordinator confirmed that most, if not all, of the senior management would be involved in the review. Medical and mental health staff also believed their input would be included in the review.

Indicator (d) The elements described in this indicator were all confirmed with the PREA Coordinator and the Superintendent. The agency routinely examines any significant incident through a critical lens to identify causal factors. Discussions with these individuals support that they look at the motivation behind any aggression in the institution, including sexual aggression, to determine if race, religion, LGBTI status, or gang was a causal factor. The Policy states, "The PREA Coordinator/Safety and Security Captain shall consider whether PREA incidents were motivated by racial or group dynamics. When incidents are determined to be motivated by racial or other group dynamics, the PREA Coordinator/Safety and Security Captain shall immediately notify the Superintendent." The Policy goes on to state, "As part of the incident review, the area in the Facility where the incident allegedly occurred will be assessed for barriers, camera positioning, and staff line of sight." The jail provided a form for recording the findings of potential incident reviews. The form mirrors the standard language and asks the key elements of this indicator.

Indicator (e) None of the current investigations required a review or had an actionable recommendation. The Superintendent described his management process for reviewing all critical incidents with an eye toward system improvement. As noted in indicator (a), the agency policy language requires the review to include recommendations for improvement.

	<p>Compliance Determination</p> <p>The CCDOC requires critical incident reviews to occur on all major events, including PREA sexual assault cases. The Auditor spoke with a multi-disciplinary group to confirm their intended participation in incident reviews. The administration confirmed the various elements of indicator (d) are part of these reviews. Absent any sexual assault reviews, the Auditor based compliance on policy and on the various staff's understanding of the expected process and the form in place to record the team's findings during the review.</p>
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115.87	<p>Data collection</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>CCDOC website (annual report)</p>
	<p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Supervisory Staff</p> <p>Summary Determination</p> <p>Indicator (a) The agency collects data consistent with the policy definitions, which were developed to be consistent with the standard. 4 D 200 Prison Rape Elimination Act states, "The PREA Coordinator/Safety and Security Lieutenant will collect</p>

accurate, uniform data for every reported incident of sexual abuse using the Offender Protection Investigation Form: Investigation Details (Attachment 4)." The CCDOC PREA Policy includes a definition section that uses definitions consistent with those in the Prison Rape Elimination Act. CCDOC, as stated in standard 115.12, does not contract for beds for the housing of its inmates at other facilities.

Indicator (b) The Carroll County Department of Corrections has developed an annual report with aggregate data from the Carroll County Department of Corrections. The PREA policy has language about this indicator. "This data is obtained from multiple sources, including reports, investigation files, and sexual abuse incident files and will be aggregated annually." The Auditor also reviewed the agency's annual reports, published on the CCDOC website for 2023 and 2024. The PREA Coordinator explained to the Auditor how information about the incident is routed to him. Interviews with line supervisors confirmed that the PREA Coordinator and the Investigator are informed of all allegations.

Indicator (c) The Auditor was able to confirm that the various elements of the Survey of Sexual Violence are maintained and could be used to complete the report if requested by the Department of Justice. There has been no request by the Department of Justice for a Survey of Sexual Violence reports from CCDOC. Interviews with the PREA Coordinator confirmed that the required elements were tracked.

Indicator (d) The CCDOC requires the retention of all records related to sexual assault allegations at facilities. Copies of criminal files involving inmate-on-inmate contact will be retained by the investigating agency, with a copy provided to the PREA Coordinator. The PREA Coordinator would receive all incident outcomes and ensure the accuracy of the data. CCDOC policy states; "The PREA Coordinator/Safety and Security Captain will ensure that all collected sexual abuse data is reviewed for corrective action, properly stored, securely retained, protected and entered into the PREA Investigative Module, and documented using the "Sexual Emergency Checklists (See Attachments 1,2, and 3, and the Offender Protection Investigation Form: Investigation Details," (Attachment 4). NOTE: Before making sexual abuse data publicly available, CCDOC will remove all personal identifiers."

Indicator (e) The Carroll County Department of Corrections does not subcontract beds to supervise individuals in custody.

Indicator (f) The Department of Justice has not requested PREA-related information from the Carroll County Department of Correction in the past year.

Compliance Determination

The Auditor has found the standard to be compliant. The CCDOC has a system in

	<p>place for collecting uniform data that could be used to complete the Survey of Sexual Violence. The CCDOC Annual PREA report includes data for the CCDOC facility. Compliance is based on discussions with the PREA Coordinator, Superintendent, and facility supervisory staff, which supports the information being routinely tracked and provided to the PREA Coordinator.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Annual PREA Reports</p> <p>Carroll County Department of Corrections website</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections utilizes both data related to PREA incidents and data related to other critical safety incidents to determine program improvements. The Superintendent reports that he meets with facility leadership almost daily, including the Investigator and the PREA Coordinator. The Superintendent discussed how he uses data with his management team to assess needs. Interviews with the Superintendent and the PREA Coordinator support critical analysis of PREA incidents and all critical events. The Superintendent confirmed that his team looks for trends to guide further policy/ procedural practices, as well as how resources are allocated. Agency policy states, "The PREA Coordinator/Safety and Security Captain will ensure that all collected sexual abuse data is reviewed for corrective action, properly stored, securely retained, protected and entered into the PREA Investigative Module, and documented using the "Sexual Emergency Checklists (See Attachments 1,2, and 3, and the Offender Protection Investigation Form: Investigation Details," (Attachment 4).</p>

NOTE: Before making sexual abuse data publicly available, CCDOC will remove all personal identifiers.

F. The Department will retain all written reports pertaining to the administrative or criminal investigation of an alleged sexual assault, or sexual harassment for as long as an alleged abuser of an inmate in CCDOC custody is incarcerated or employed by the agency, plus five years.

D. Data shall be retained for 10 years." The PREA Coordinator who is responsible for data collection confirmed the information in the policy. The Agency has posted the two previous years' annual reports and findings to the jail website.

Indicator (b) The CCDOC publishes an annual report comparing the number of sexual assault and sexual harassment claims. The report indicates whether the accused was a staff member or an inmate and provides the outcome determination.

Indicator (c) The CCDOC Superintendent confirmed that the PREA annual report developed by the PREA Coordinator and the facility investigator is reviewed and approved by him before being placed on the agency's website. The Auditor reviewed the CCDOC website for the documentation of the annual report and to confirm public access to the information.

Indicator (d) The CCDOC removes all identifiers from summary reports; this is stated in the policy language listed in indicator (a). The Auditor reviewed the report but was unable to identify any individuals from the investigation reports. The facility has very few allegations in a review of information that covered 2023 to the present.

Compliance Determination

The jail policy requires the PREA Coordinator to review the data elements to ensure data consistency. Interviews with the Superintendent supported the conclusion that he uses data to inform decisions on programmatic and policy needs. This is consistent with the standard expectation of critically reviewing data to identify problem areas and implementing corrective actions. The PREA Coordinator works as the Security Captain and meets regularly with the Major and the Superintendent, allowing trends to be identified. His office is steps away, and the auditor observed regular communication among all the parties.

Recommended changes are forwarded to the Superintendent for consideration by policy. The Auditor finds the facility compliant with standard expectations. This determination was based upon the interviews completed and the documents reviewed.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p>
	<p>Carroll County Department of Corrections Pre-Audit Questionnaire</p>
	<p>Policy 4 D 200 Prison Rape Elimination Act</p>
	<p>Individuals interviewed/ observations made.</p>
	<p>PREA Coordinator</p>
	<p>Summary Determination</p>
	<p>Indicator (a) The CCDOC has policies that protect the security of information. Policies 4 D 200 outline the safety of PREA information and who has access. Discussions with the PREA Coordinator, the Lieutenant who conducts screenings, and medical and mental health staff reveal layers of controls in place to prevent unnecessary disclosure. The agency's electronic case management system and electronic medical records systems are separate and limit the access that can be used to exploit an individual. In response to an incident, the PREA Coordinator can retain all relevant information.</p>
	<p>Indicator (b) The CCDOC has added information related to PREA incidents, and the agency's efforts to support a zero-tolerance culture are published in an annual report available on the agency website during the post-audit period. The website also includes information on the number of PREA incidents alleged to have occurred and the investigative outcomes dating back to 2020. Policy 4 D 200 addresses this indicator's concern,</p>
	<p>Indicator (c) The annual report located on the CCDOCs website does not include any identifiers.</p>
	<p>Indicator (d) Policy, as mentioned in 115.87, sets forth the obligations of the agency's PREA Coordinator as the individual responsible for collecting all incidents. The PREA Coordinator is aware that all PREA-related Data must be maintained for a period of no less than ten years. Policy languages also confirm this expectation: sexual abuse data</p>

will be retained for a “minimum of 10 years.”

Compliance Determination

The Carroll County Department of Corrections (CCDOC) Policy 4-D-200, Prison Rape Elimination Act, addresses the requirements of this standard. All facility data is provided to the agency PREA Coordinator, who is responsible for maintaining and securing all data. When the facility has an incident, all identifying information is to be removed before any information is made public. All data for the annual report must be retained for a minimum of 10 years, per policy 4 D 200. Compliance is based on an interview with the PREA Coordinator, Information available on the Carroll County Department of Corrections’ Website, and the facility policy defining the requirements.

115.401 Frequency and scope of audits	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed. Carroll County Department of Corrections Pre-Audit Questionnaire Policy 4-D-200 Prison Rape Elimination Act
	Individuals interviewed/ observations made. PREA Coordinator
	Summary Determination Indicator (a) The Carroll County Department of Corrections’ website indicates that it has been audited for PREA compliance since 2022. The website confirms that audits are conducted in compliance with the standard 3 years, starting with the initial audit 3 years ago. The facility has no current contracted facility for beds. Indicator (b): The CCDOC only has one facility. Indicator (h) The Auditor did have open access to all parts of the facility. The Auditor was able to move freely about the housing units during the tour to speak informally

	<p>with inmates and staff, ensuring they were aware of the audit, the agency's efforts to educate inmates, and how to seek assistance if needed. The PREA Coordinator and the Shift Commanders assisted the Auditor with movement and ensured that inmates and staff were brought in a timely fashion.</p> <p>Indicator (i) The Carroll County Department of Correction provided information in the OAS and sufficient on-site access to paper and electronic documentation for verification. The Auditor kept some hard-copy documents and requested that the remaining items be uploaded once the site visit was completed. During the post-audit visit, the facility has added the required materials to finalize some standards and provide corrective measures for concerns identified during the site visit.</p> <p>Indicator (m) The Auditor was able to interview inmates in private spaces throughout the facility. The space provided was appropriate for the Auditor and the inmate to speak freely without others present. The Auditor used translation services during the Audit to communicate with LEP inmates. Most inmate interviews took place in an office near the housing units. Most staff interviews took place in the conference room in the administrative area.</p> <p>Indicator (n) The Auditor received no confidential letters from inmates, staff or other interested parties. Random inmates knew about the audit, the posting, and that information to the auditor would be confidential unless there were safety or criminal concerns. The Auditor confirmed the posting had been up with administration, staff, and inmates.</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections complies with all the standards and corresponding indicators. The facility has put policies and procedures in place, provided training, and defined roles that aid in continued compliance. The audit process allowed for a complete and thorough audit of the standard expectation. There were no barriers to the process, and the auditor believed the staff and inmates were forthcoming in discussions supporting policy, procedures, and a culture where sexual misconduct is not acceptable.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policies and written/electronic documentation reviewed.
	Carroll County Department of Corrections Pre-Audit Questionnaire
	Carroll County Department of Corrections website

	<p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator: (f) The Carroll County Department of Corrections website has its previous PREA Audits posted. This was determined through a review of the county's DOC Website.</p> <p>Compliance Determinations:</p> <p>The Carroll County Department of Corrections website posts all previous facility PREA audits under its PREA information link. The Auditors' prior experience with the agency allows for first-hand knowledge of the prompt uploading of these documents. The Auditor also considered that the agency's PREA Coordinator was aware of the timing requirement for posting the audit.</p>
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Appendix: Provision Findings

115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	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
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

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

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

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

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

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

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

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

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

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

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

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

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

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

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

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

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

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

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

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

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c) Inmate reporting		
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d) Inmate reporting		
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a) Exhaustion of administrative remedies		
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b) Exhaustion of administrative remedies		
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c) Exhaustion of administrative remedies		
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

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

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

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

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

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

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

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

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

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

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

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

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

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

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

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

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

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

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

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	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 permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

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