

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:	Warren Correctional Institution		
Physical address:	5787 State Route 63, Lebanon, Ohio 45036		
Date report submitted:			
Auditor Information			
Address:	P.O. Box 296, Rudyard, MI 49780		
Email:	jpallen@lighthouse.net		
Telephonenumber:	906-478-5841	Cell	906-298-1339
Date of facility visit:	August 6-8, 2014		
Facility Information			
Facility mailing address: <i>(if different from above)</i>	Same as above		
Telephone number:	513-932-3388		
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	X <input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	x Prison	
Name of PREA Compliance Manager:	Mark Stegemoller		Title: Operational Compliance Mgr
Email address:	Mark.Stegemoller@dorc.state.oh.us		Telephone number: 513-932-3388 Ext 2197
Agency Information			
Name of agency:	Ohio Department of Rehabilitation and Correction		
Governing authority or parent agency: <i>(if applicable)</i>	State of Ohio		
Physical address:	770 West Broad St., Columbus, Ohio 43222		
Mailing address: <i>(if different from</i>			

<i>above</i> Same as above			
Telephone number:		614-752-1159	
Agency Chief Executive Officer			
Name:	Gary C. Mohr	Title:	Director
Email address:	Gary.Mohr@dorc.state.oh.us	Telephone number:	614-752-1164
Agency-Wide PREA Coordinator			
Name:	Andrew Albright	Title:	Chief, Bureau of Agency Policy and Operational Compliance
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AUDIT FINDINGS

NARRATIVE:

On August 6-8, 2014, an audit was conducted at the Warren Correctional Institution – Lebanon, Ohio, to determine compliance with the Prison Rape Elimination Act standards finalized August 2012.

A complete tour of the facility, to include outside perimeter buildings, was conducted on August 4, 2014 to coincide with the ACA reaccreditation audit to be conducted at the facility. The following areas and operations were visited and observed; Inmate living areas, medical operations, chapel area, admissions & discharge, education areas, food service, facility maintenance operations, records, OPI industries operations.

Documents reviewed for this audit included, DO RC policies, Institutional Supplements, contracts, staff training records, personnel files, volunteer training records, sexual abuse & harassment complaints, training curriculums, formal interviews were scheduled through random selection of staff and inmates (Random selection by auditor) from schedules and rosters provided by the staff prior to the audit. The interviews were conducted with the following: Warden, PRERA Compliance Manager/Coordinator (Facility), three medical staff, two contract staff (Medical & Mail Room), human resource manager, corrections officers from all areas of the complex (morning, afternoon & evening shifts), supervisors, the facility investigative staff, staff who conduct intake and screen inmates, 12 random inmates, two transgender inmates, one inmate deemed vulnerable at intake, one inmate (Limited English Proficiency), additionally, inmates and staff were interviewed during the audit spontaneously. The agency head, and the agency PREA Coordinator were not interviewed, as they had participated in an interview at a previous PREA audit.

Narrative Addendum:

During the course of the PREA Audit, there were three areas of concern to this auditor, those being the Ohio Penal Industries (OPI) operation, the Warehouse, and the Quartermaster Department. This auditors concern was with surveillance characteristics of these areas, being that there were no cameras at any of the locations. In addressing this with the Warden, it was learned that the facility had done an assessment of their surveillance capabilities, and had addressed these areas, and have cameras on hand and ready for installation. For security reasons, the warehouse has a unique

situation in that there are several blind areas, and it would be cost prohibitive to install surveillance equipment in all of the necessary areas, so for this area there has been a protocol put in place, which states that whenever more than one inmate goes anywhere in the warehouse to retrieve stock, there will be a staff member to accompany them. With this protocol, the auditor felt that this area has been addressed. The staffing in the OPI with the civilian supervisors and the one correctional officer assigned is probably adequate for this area, since the only blind spot being the lavatory area. The facility for all three of these areas has established a time line for placement of the surveillance equipment. That time line is; External cameras are being installed during the period of 11 Aug through 11 Sep, The Quartermaster (one female staff assigned alone) camera will be installed on 11 Sep, the warehouse camera will be installed sometime between 11 Sep and 11 Oct, and the OPI cameras will be installed during the period of 11 Aug to 11 Sep. In discussing this concern with the PRC, it was determined that this facility has well exceeded the requirement for surveillance. In addition to these concerns, the facility is also going to installed additional cameras in the living areas of the facility to enhance the coverage in those areas as well.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Warren Correctional Institution is located at 5787 State Route 63, Lebanon, Ohio, and one mile east of I-75. The Warren Correctional Institution (WCI) was constructed in 1985-1989 at a cost of \$4 Million. The close facility was ACA Accredited on January 17, 1994. Warden Crutchfield has been Warden for this institution since December 2012. The complex consists of a total of 70 acres, 45 acres within a fence and 25 acres outside the fence, constructed in a campus style with 12 individual buildings, and one (1) additional building outside the secure perimeter, warehouse, which is shared with the Lebanon Correctional Institution next door. The institution is surrounded by two security fences, and eight rolls of razor wire. The perimeter fence is outfitted with a micro wave fence alarm. Additionally, two armed mobile security patrols re-enforce the perimeter security. There is a recreation yard providing two (2) softball diamonds, three (3) handball courts, two (2) basketball courts, and a quarter-mile running track.

The first inmates in the institution were received on August 15, 1989. Since that time, the inmate population, number of employees, and treatment programs, educational programs, and vocational programs have changed and grown. The facility now houses 1351 inmates in 8 pods (living areas). Two units contain specialized care, a Residential Treatment Unit (RTU) for inmates with serious mental illness, and a Residential Substance Abuse/Literacy Unit for those whose reading level is below a 6.0 grade level and who need substance abuse treatment.

The institution employs 382 individuals who represent some seventy (70) occupations and professions. The staff provides services quite similar to those required to manage a small community ranging from education to maintenance and sanitation to industry and religion.

The Ohio Penal Industries (OPI) operates four (4) prison industries in the institution. These include the tubular furniture shop, the notebook bindery operation, and outdoor furniture and recently hand deflashing of automotive parts for a local company.

WCI offers the following educational programs: Adult Basic Education (ABE), General Education Development (GED), and Literacy, certified college courses through Wilmington College, Vocational Electronics Certification, and Horticulture Certification. All programs are conducted by fully certified teachers and are accredited by the Ohio Department of Education. The Education Department also operates the Institution Library, which houses several thousand volumes (fiction and non-fiction), a Law

Library, numerous periodicals, magazines, and newspapers, and many other educational resources. WCI also has computers in the Law Library; the inmate population can now look up (view only) information pertinent to their cases.

Ranges of resources are available to meet the various social needs of inmates under case management. These resources, including re-entry programming such as Anger Management, Conflict Resolution, Parenting, and Financial Management are offered.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded:

Number of standards met: 42

Number of standards not met:

Non-applicable: 1

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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 action)

Policy 79-ISA-01 Prison Rape Elimination, WCI Zero Tolerance Policy, 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigations, and Prevention of Retaliation, OSC TO, and WCI Table of Organization, address this standard.

§115.12 - Contracting with other entities for the confinement of inmates

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 action)

ORDC does not have any additional samples of contracts for confinement entered into or renewed after August 20, 2012. ODRC MEMO Subject 115.12 states N/A. ODRC only contracts with private agencies for inmates housed at Lake Erie C.I. and North Central C.C. No other inmates are housed with a private agency or other entity.

§115.13 – Supervision and Monitoring

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 action)

Policy 79-ISA-01 P:4 S:B1-3, Appendix B, (PREA staffing Plan) Prison Rape Elimination, WCI Staffing Plan, 50-PAM-02 Inmate Communications/Weekly Rounds, and Variance, Ohio's DRC 6011 Employee Visit Record shows Sgt's, Lt's, Capt's, Warden, and Assistant Warden's conducting UAR's in housing units to include Segregation Housing Unit. These policies and records support compliance with this standard.

§115.14 – Youthful Inmates

- 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 action)

This standard is Non Applicable to WCI, WCI does not house Youthful Offenders.

§115.15 – Limits to Cross-Gender Viewing and Searches

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

Ohio DRC has policies in effect that address this standard, but WCI is an all male facility, therefore it does not apply to this facility.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

Policy 79-ISA-01 Prison Rape Elimination, 64-DCM-02 Inmates with Disabilities, and Memo dated 5-7-2014 stating that in the past 12 months, WCI has not taken any actions that would result in a fundamental alteration in the nature of a service, programs, or activity, or in undue financial and administrative burdens, support compliance with this standard.

§115.17 – Hiring and Promotion Decisions

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

Policies 79-ISA-01 Prison Rape Elimination, 34-PRO-07 Background Investigations, 31-SEM-02 Standards of Employee Conduct, and DRC 1674 PREA Background Check Authorization, support compliance with this standard.

§115.18 – Upgrades to Facilities and Technology

- 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 action)

Memo, dtd 4-23-14 from Mark Stegemoller, Facility Compliance Manager stating that WCI has not undergone any substantial expansions or modifications since August 2012, plus the facility staffing plan and surveillance cameras support compliance with this standard.

§115.21 – Evidence Protocol and Forensic Medical Examinations

- 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 action)

Policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation, 310-SEC-13 Protection of a Crime Scene, 68-MED-15 Bureau of Medical Services Co-Payment Procedures, and MOU OSHP support compliance for this standard.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

- 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 action)

Allegation of Sexual Abuse Packet, PREA Incident Report Packet with OSHP referral, AR-5120-9-24 Incident Reporting and Investigation, and DRC Policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, support compliance for this standard.

§115.31 – Employee Training

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 action)

79-ISA-01, 39-TRN-1o Variance, ELM Training Printout-All Staff PREA training, Employee OJT Training for staff arriving from an opposite gender facility (DRC 1962), Training Records, and Staff Training Curriculum support compliance for this standard.

§115.32– Volunteer and Contractor Training

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 action)

Compliance for this standard is validated by, Contractor/Volunteer/Intern Training Acknowledgements, and PREA Training Session Reports.

§115.33 – Inmate Education

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 action)

79-ISA-01, 52-RCP-10, 64-DCM-02. Compliance for this standard is established through auditor review of completed Inmate Orientation Checklist with acknowledgement by inmate signature, List of new Inmate arrivals, Inmate acknowledgement of viewing of PREA education video and receipt of script of video, and acknowledgement of PREA education and Departments Zero Tolerance Policy, Inmate Handbook, and Posters.

§115.34 – Specialized Training: Investigations

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 action)

79-ISA-01 P:5 S:C5, 79-ISA-02 P:7 S:C1, PREA training Session Reports, Activity transcript, and completion certificates from National Institute of Corrections addresses this standard.

§115.35 – Specialized training: Medical and mental health care

- 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 action)

79-ISA-01 P:6 S:9, PREA training session reports, DRC e-learning report, Memo, Mark Stegemoller (PREA Compliance Manager) Specialized Training for Medical & Mental Health care staff (WCI Medical Practitioners do not conduct forensic exams), WBT Activity transcript, and Training Acknowledgement Forms, address this standard.

§115.41 – Screening for Risk of Victimization and Abusiveness

- 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 action)

79-ISA-04 P:3 S:B1, P:4 S:2, P:4-6, P:3 S:6, P:3 S:5, PREA Risk Assessment, PREA Risk Assessment-Past, Review of Training Records/Logs and personnel records of Medical & Mental Health practitioners, to include state staff as well as contract staff support compliance with this standard.

§115.42 – Use of Screening Information

- 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 action)

79-ISA-04 P:6 S:F1, 79-ISA-05 P:3 C:2, P:4 S:F1, P:3 S:C3, Risk Assessment with Strategy Plan, DRC 1167 PREA Accommodation Strategy, DRC 1171 PAS Team, Housing Assignments of LGBTI inmates, and DRC 1171E PREA Risk Assessment-Past, support compliance with this standard.

§115.43 – Protective Custody

- 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 action)

79-ISA-04 P:5 S:D2, P:5-6 S:D3c, and WCI has a process in place, DRC 1184 Involuntary Segregation which addresses all of the specifics of this standard. In addition, there is a memo from Mark Stegemoller, PREA Compliance Manager, dated 5-16-2014, which states that WCI has not completed a PREA Risk Assessment for involuntary segregation or an imminent Risk of Abuse with Involuntary Segregation Placement . All of this supports compliance with this standard.

§115.51 – Inmate Reporting

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 action)

Policy 79-ISA-02 P:3 S:A1 & S:A1b, P:4, P:4 S:2b, Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, Inmate Handbook, Posters, Education Video Script, MOU with outside agency, and verbal notification to staff. All Staff Training Curriculum, and the Employee Handbook support compliance with this standard.

§115.52 – Exhaustion of Administrative Remedies

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 action)

Memo to PREA Auditor states that ODRC does not utilize the inmate grievance procedure for allegations of sexual abuse or sexual harassment. All cases are referred to the Institution Investigation Department. The memo supports compliance for this standard.

§115.53 – Inmate Access to Outside Confidential Support Services

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 action)

Policy 79-ISA-01 P:8 S:5, Prison Rape Elimination, Inmate Handbook, and WCI local rape crisis center poster support compliance with this standard.

§115.54 – Third-Party Reporting

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 action)

The Inmate Handbook and postings throughout the facility support compliance with this standard.

§115.61 – Staff and Agency Reporting Duties

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 action)

Policy 79-ISA-02 P:5 S:D1, P:4 S:3b, Prison Sexual Misconduct Reporting, Response, Investigation and prevention of Retaliation, DRC 1169, and DRC 1000, support compliance with this standard. Per Memo from Mark Stegemoller, PREA Compliance Manager, there have been no reports of sexual abuse or harassment from a third party or anonymously, or from an inmate about sexual abuse or harassment that has occurred in the community.

§115.62 – Agency Protection Duties

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 action)

Policy 79-ISA-04 P:5 S:D1, P:5 S:d, P:5 S:d i, ii, PREA Risk Assessment and Accommodation Strategies addresses this standard.

§115.63 – Reporting to Other Confinement Facilities

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 action)

Policy 79-ISA-02 P:5 S:d & S:d i, ii, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation, outlines procedures to be followed in addressing this standard. Memo from Mark Stegemoller, PREA Compliance Manager dated 5-16-2014 states that WCI has not received from any inmate any allegations of sexual abuse that occurred at another facility.

§115.64 – Staff First Responder Duties

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 action)

Policy 79-ISA-02 P:4-5 Appendix A, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation, and WCI's Policy 13-WCI-01 Sexual Abuse Coordinated Response Plan address this standard.

§115.65 – Coordinated Response

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 action)

Policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, and WCI's policy on Coordinated Response address this standard.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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 action)

Central office reported there has been no collective bargaining agreement entered into or renewed since August 2012.

§115.67 – Agency protection against retaliation

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 action)

Policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation address this standard.

§115.68 – Post-Allegation Protective Custody

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 action)

The procedures outlined in ODRC Policy 79-ISA-02 P:6, Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation addresses this standard.

§115.71 – Criminal and Administrative Agency Investigations

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 action)

Policy 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, MOU w/OSHP and Memo from Andrew Albright, ODRC PREA Compliance Coordinator, and the Ohio record Retention Schedule support compliance with this standard.

§115.72 – Evidentiary Standard for Administrative Investigations

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 action)

Policy 79-ISA-02 P:10 S:i, Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation address the preponderance of evidence issue related to this standard.

§115.73 – Reporting to Inmate

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 action)

Policy 79-ISA-02 P:8 S:C, Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, Completion of investigation notification to inmate and DRC Policy Variance address this standard.

§115.76 – Disciplinary sanctions for staff

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 action)

79-ISA-02 P:3 S:A2, Policy 31-SEM-02 Standards of Employee Conduct address this standard.

§115.77 – Corrective action for contractors and volunteers

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 action)

Policy 79-ISA-01 P:3-4 S:G1, 71-SOC-01 P:8 S:3, Recruitment, Training and Supervision of Volunteers, 79-ISA-01 Prison Rape Elimination, and DRC 4376 Standards of Conduct for Contractors, Volunteers and Interns addresses this standard.

§115.78 – Disciplinary sanctions for inmates

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 action)

Policies 56-DSC-01 P:3-7 inmate Disciplinary Process, 5120-9-06 Inmate Rules of Conduct, 5120-09-08 Disciplinary Procedures for Violations of Inmate Rules of Conduct Before the Rules Infraction Board, 79-ISA-02 P:11 S:E5 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation address this standard.

§115.81 – Medical and mental health screenings; history of sexual abuse

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 action)

Policy 67-MNH-02 Mental Health Screening Assessment Activities, 79-ISA-04 P:3 S:2, PREA Risk Assessments and Accommodation Strategies, Inmate Handbook, 79-ISA-02 Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, and 79-ISA-04 Policy Variance Request address this standard.

§115.82 – Access to emergency medical and mental health services

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 action)

Policy 79-ISA-02 P:7 S:8, Prison Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation, 67-MNH-09 Crisis Management and Suicide Prevention, and MED-B11 Medical Case Guidelines for Sexual Abuse Conduct or recent Sexual Abuse address this standard.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

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 action)

Policy 79-ISA-02 P:7 S:7, Prison Sexual Misconduct Reporting, Response, Investigation and prevention of Retaliation, MED-B11 Medical Case Guidelines for Sexual Conduct or Recent Sexual Abuse, 67-MNH-02, Mental Health Screening and Mental Health Classification, MNH-04 Transfer and Discharge of the Mental Health Caseload, and MNH-15 Mental Health treatment address this standard.

§115.86 – Sexual abuse incident reviews

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy 79-ISA-03 P:3 S:B1, Sexual Abuse Review Team, Incident Review, PREA incident with Sexual Assault Review Team, and SART address this standard.

§115.87 – Data Collection

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy 79-ISA-01 P:2-3, 8-9, SSV-2012 Prison Rape Elimination, and the PREA Incident Packet Instructions, 2012 BJS Survey on Sexual Violence, and PREA Private Facility Incident Data 2013, addresses this standard.

§115.88 – Data Review for Corrective Action

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

The Annual Internal Report on Sexual Abuse Data addresses this standard.

§§115.89 – Data Storage, Publication, and Destruction

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy 79-ISA-01 P:9 S:8 Prison Rape Elimination and The Record Retention Schedule support compliance with this standard.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

James H. Allen

August 9th, 2014

Auditor Signature

Date