

# Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim     Final

Date of Report    September 1, 2019

## Auditor Information

Name:    Natasha Mitchell

Email:    nshaferdu@gmail.com

Company Name:

Mailing Address:    PO Box 110993

City, State, Zip:    Aurora, CO 80042-0993

Telephone:    720-371-2172

Date of Facility Visit:    July 15-17, 2019

## Agency Information

Name of Agency:

Washington County Justice Center

Governing Authority or Parent Agency (If Applicable):

Physical Address:    26861 US Hwy 34

City, State, Zip:    Akron, CO 80720

Mailing Address:    26861 US Hwy 34

City, State, Zip:    Akron, CO 80720

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency Website with PREA Information:    <http://washcountyjustice.com/prea/>

## Agency Chief Executive Officer

Name:    Jon Stivers

Email:    jstivers@co.washington.co.us

Telephone:    970-345-6865

## Agency-Wide PREA Coordinator

Name:    Amanda Stivers

Email:    astivers@co.washington.co.us

Telephone:    970-345-6865

PREA Coordinator Reports to:

Undersheriff Robbie Furrow

Number of Compliance Managers who report to the PREA Coordinator

1

## Facility Information

Name of Facility: Washington County Justice Center

Physical Address: 26861 US Hwy 34

City, State, Zip: Akron, CO 80720

Mailing Address (if different from above):

City, State, Zip:

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: <http://washcountyjustice.com/prea/>

Has the facility been accredited within the past 3 years?  Yes  No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe:

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:  
N/A

### Warden/Jail Administrator/Sheriff/Director

Name: Robbie Furrow

Email: [rfurrow@co.washington.co.us](mailto:rfurrow@co.washington.co.us)

Telephone: 970-345-6865

### Facility PREA Compliance Manager

Name: David Werner

Email: [dwerner@co.washington.co.us](mailto:dwerner@co.washington.co.us)

Telephone: 970-345-6865

### Facility Health Service Administrator N/A

Name: Kerrie Prentice

Email: [shp@washington.co.us](mailto:shp@washington.co.us)

Telephone: 970-345-6865 Ext 2022

## Facility Characteristics

Designated Facility Capacity:	220	
Current Population of Facility:	136	
Average daily population for the past 12 months:	177.8	
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males	
Age range of population:	18 and up	
Average length of stay or time under supervision:	6 months	
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum, Protective Custody	
Number of inmates admitted to facility during the past 12 months:	2,393	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	207	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	839	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p><b>Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):</b></p>	<input type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input checked="" type="checkbox"/> State or Territorial correctional agency <input type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input checked="" type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	41	

Number of staff hired by the facility during the past 12 months who may have contact with inmates:	22
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	5
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	6
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	4
<b>Physical Plant</b>	
<p><b>Number of buildings:</b></p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	1
<p><b>Number of inmate housing units:</b></p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	11
Number of single cell housing units:	3
Number of multiple occupancy cell housing units:	6
Number of open bay/dorm housing units:	2
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	12
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**Medical and Mental Health Services and Forensic Medical Exams**

Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Where are sexual assault forensic medical exams provided? Select all that apply.	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: <a href="#">Click or tap here to enter text.</a> )

**Investigations**

**Criminal Investigations**

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	1
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	<input type="checkbox"/> Local police department <input checked="" type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: <a href="#">Click or tap here to enter text.</a> ) <input type="checkbox"/> N/A

**Administrative Investigations**

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	1
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	<input checked="" type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: <a href="#">Click or tap here to enter text.</a> ) <input checked="" type="checkbox"/> N/A

# Audit Findings

## Audit Narrative

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

### Introduction

The Prison Rape Elimination Act (PREA) onsite audit of the Washington County Justice Center (WCJC) was conducted on July 15-17, 2019. The WCJC is located at 26861 US Hwy 34, Akron, Colorado 80720. The audit was conducted by Natasha Mitchell from Henderson, Colorado who is a U.S. Department of Justice Certified PREA Auditor for juvenile and adult facilities. The auditor conducted the audit as a single auditor with no additional support staff. The auditor contracted with WCJC on March 20, 2019 and began communicating with the agency to begin preparing for the pre onsite and onsite audit phases. The Washington County Sheriff's Office (WCSO) participated in a PREA audit in 2016 and demonstrated full compliance on September 4, 2016.

### Audit Methodology Pre-Onsite Audit Phase

Prior to the onsite audit, the auditor-initiated discussions concerning the logistics for preparing for the onsite audit as well as the presence of the auditor onsite. Additional communication involved both the PREA Coordinator and the designated PREA Compliance Manager.

### Notice of Audit Posting

The audit notices were forwarded to WCSO on June 3, 2019. The audit notices include a statement regarding confidentiality and the inmate's ability to correspond with the auditor through U.S. postal mail or email. The auditor did not receive notification from WCSO that the notices were posted and once onsite observed that the notices were not posted throughout the facility; the auditor observed two notices (one in intake and one in the entrance of the facility). During the onsite phase the facility posted the notices throughout the facility. The posting of the notices during the onsite was confirmed during inmate interviews. The posting of the notices was further assessed during the report writing phase by requesting photographs of the notices via email on July 23<sup>rd</sup> and again on August 22<sup>nd</sup>.

The Pre-Audit Questionnaire (PAQ) and supporting documentation was received by the auditor on May 13, 2019. The documentation was provided to the auditor through a zip file through secure email. The auditor reviewed the PAQ, policy, procedures, and supporting documentation on July 1, 2019. Using the Auditor Compliance Tool and Checklist of Documentation, the auditor's initial analysis and review of the information determined there was no identified need for additional information at that time.

### Requests of Facility Lists

WCSO provided the following information for interview selections and document sampling:

Inmate Roster	Selected inmates on July 15, 2019
Inmate with disabilities	One inmate was interviewed
Inmate who are Limited English Proficient (LEP)	None were identified
LGBTI Inmates	None were identified
Inmate in segregated housing	One inmate was interviewed
Inmate in isolation	None were identified

Inmate who reported sexual abuse	One was interviewed
Inmate who reported sexual victimization during risk screening	None were identified
<b>WCSO Staff Rosters</b>	
Complete Staff Roster	The roster was provided to the auditor on July 15, 2019
Specialized Staff	Specialized staff were identified on the roster
Contractors who have contact with inmates	Southern Health Partners, Trinity Services, Jail Based Treatment and Centennial Mental Health
All volunteers who have contact with inmates	WCSO provided a list of volunteers, which included five individuals.
All grievances/allegations made in the previous 12 months	The facility reported zero allegations reported through WCSO grievance procedures.
All allegations of sexual abuse and sexual harassment reported for investigation in the previous 12 months.	The facility reported there were four sexual abuse and sexual harassment allegations reported in the previous 12 months.
<b>External Contacts</b>	
The following external contacts were made:	
Advocacy and SAFE/SANE Programs	Sexual Assault Response Advocate (SARA)

## Research

- “Former Washington County deputy turns himself in on sexual assault on child charges” – Denver 7 October 26, 2018  
<https://www.thedenverchannel.com/news/crime/former-washington-county-deputy-turns-himself-in-on-sexual-assault-on-child-charges>

## Onsite Audit Phase

### Entrance briefing

An entrance briefing was held with the Sheriff, Undersheriff, Captain (PREA Coordinator) and Lieutenant (PREA Compliance Manager). Introductions were made, the agenda for the onsite audit was discussed and the auditor began the site review accompanied by the PREA Coordinator and the PREA Compliance Manager.

### Site Review

The auditor accessed and observed all areas of the facility. The auditor was provided with the facility physical layout prior to the onsite audit, which allowed the auditor to become familiar with the facility and camera placement. The WCSO facility has one building with 11 housing units; three single cell housing units, six multiple occupancy cell housing units; and two open bay/dorm housing units. In addition to the housing units, there is the public entrance, law enforcement sally port, intake area, medical clinic, laundry room, kitchen, administrative area, master control and no contact visitation rooms. The inmate population count on the first day of the onsite audit was 137 inmates.

### Processes and areas observed

On the first day of the onsite audit there were zero inmates admitted to the facility. During the tour, the auditor gathered information about the intake process. The intake process as described by the PREA Coordinator and PREA Compliance Manager was confirmed during the intake staff interview. During the tour the auditor noticed areas within the facility did not have audit notices posted; however, the auditor did observe zero tolerance and information explaining how to report sexual abuse and sexual harassment allegations within the facility. The placement of cameras was observed to be strategically placed throughout the facility. The auditor was provided with a facility radio and full access. The PREA

Coordinator allowed the auditor to view the facility kiosk database that allows the inmates to submit PREA reports and grievances to report allegations of sexual abuse and sexual harassment.

During the site review the PREA Compliance Manager explained the shower procedures and reported information was confirmed during inmate interviews. The auditor observed opposite gender announcements and the process in which opposite gender staff ensure all inmates are afforded privacy prior to entering a unit.

**Specific area observations**

There are 11 units that serve as living units. The single cell housing units are equipped with designated bathroom and shower areas that are accessible to the inmates as needed. The auditor observed during the tour prior to the team entering the female housing unit and vice versa for male inmates, the staff member will ensure no one is in the shower and will ask if everyone is appropriately dressed or require additional time to exit the restroom. The staff will allow the inmates time to ready themselves before entering the unit. The practice seemed to be a routine and an institutionalized practice. The practice was confirmed as routine during inmate interviews.

The intake area for new admissions are completed in a separate area from the living units. The intake unit, search and shower areas provide adequate privacy, which allow the inmates to disclose as much personal information that they feel comfortable disclosing.

**Interviews**

Staff interviews were conducted in the facility training room and all inmate interviews were conducted in a secure parole hearing room that can be monitored visually but does not have audio monitoring equipment. Both locations provided privacy and was centrally located to minimize disruption to programming. Specialized staff were selected based on their respective duties in the facility. On the days of the onsite two shifts were scheduled. The shifts are made up of one Sargent (Supervisor), three shift officers, one control personnel and one booking officer. Six randomly selected staff members were interviewed using the random staff interview protocol. The inmate population was 137 on the first day of the onsite audit. The auditor interviewed six specialized inmates and twelve random inmates. All interviewed inmates reported feeling safe and confident WCSO would respond to sexual abuse and sexual harassment allegations.

<b>Interviews Protocols</b>	<b>Number of Interviews</b>
Undersheriff (Agency Head)	1
PREA Coordinator	1
PREA Compliance Manager	1
Medical Staff (Contract)	1
Mental Health Staff (Contract)	1
Intake Staff	1
Volunteer	N/A
Investigation Staff	1
Administrative Staff (Human Resources)	1
Intermediate or Higher-Level Staff (Unannounced Rounds)	1
SAFE and SANE	Sexual Assault Response Advocate (SARA)
Staff who supervisor detainees in isolation	1
Staff on the Incident Review Team	5
Designated staff member charged with monitoring retaliation	1
Random sample of Staff	6
Random sample of Inmates	12



Inmate identified as lesbian, gay, bisexual, transgender or intersex	0
Inmate who reported a sexual abuse	1
Inmate with an identified disability or limited English speaking	0
Inmate in segregation	1
Inmate who disclosed prior sexual victimization during risk screening	0

### Exit Briefing

An exit briefing was conducted with the Sheriff, Undersheriff, PREA Coordinator and PREA Compliance Manager. The auditor summarized the onsite audit and initial findings. The auditor initial concern dealt the absence of visual audit notices in the facility. The PREA Coordinator and PREA Compliance Manager was informed the audit notices should be posted in high traffic and utilized areas and should remain posted until the facility receives the final audit report.

## Facility Characteristics

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

The Washington County Justice Center opened in July of 2001. This 250-bed facility houses all levels of inmates, both male and female, from the minimum-security population to the maximum - segregation populations. The facility houses three different types of inmates: local, federal, and state parole revocations.

At the time of the audit, there were 32 female inmates and 143 male inmates. There were 148 inmates who were from the Department of Corrections: 146 TPV and 2 DOC backlogs. Ten inmates were housed for the US Marshals and 17 were local inmates or from other county agencies.

The facility is entirely under one roof and provides corridor access to all areas of the facility. The Washington County courts are also housed in the same building. The housing units are divided into 8 different pods that surround a control center hub area. Deputies make rounds throughout all of the pods throughout their shift.

Most of the detention employees are working 12 hours shifts (6-6). The supervisors work an offset shift to allow for overlapping shift coverage (5-5). Control center operators work two ten-hour shifts.

The clinical services and the food service providers are contracted with the county. Trinity Services Group, Inc. currently manages the food service operation and Correctional Health Partners (CHP) manages the clinical services. Centennial Mental Health provides substance abuse treatment programs to the State parole inmates. Volunteers are also recruited to provide programs for the inmate population.

The facility is built in a manner that allows for efficient use of staff and service delivery. The facility was clean and well maintained.

## Summary of Audit Findings

*The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.*

**Auditor Note:** *No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.*

### Standards Exceeded

**Number of Standards Exceeded:** 0  
**List of Standards Exceeded:** Not applicable

### Standards Met

**Number of Standards Met:** 45

### Standards Not Met

**Number of Standards Not Met:** 0  
**List of Standards Not Met:** Not applicable

## PREVENTION PLANNING

### Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

#### 115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  Yes  No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?  Yes  No

#### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- 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  No

#### 115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)  Yes  No  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.)  
 Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office Policy 606
- Washington County Sheriff's Office SOP.
- Outline for prevention, detection, and response
- Booking screening form.
- Washington County Sheriff's Office policy manual
- Washington County Detention Center Flow Chart.
- Agency Organizational Chart & Title of PREA Coordinator
- JC flow chart.

115.11(a)-1 Policy 606

This office has zero tolerance with regard to sexual abuse and sexual harassment in this facility and will take appropriate affirmative measures to protect all inmates from sexual abuse and harassment and to promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment (28 CFR 115.11).

The facility has outlined how it will implement the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. The WCSO outline indicates the facility will adopt a staffing plan, which includes video monitoring. The outline also includes conducting unannounced rounds, prohibits cross-gender searches, ensure disabled and limited English-speaking inmates are provided PREA information in ways that they understand, and every inmate will be screened for risk of victimization or perpetration. WCSO does not house youthful inmates.

115.11(a)-3

The Washington County Sheriff's Office mandates **zero tolerance** toward all forms of sexual abuse and sexual harassment. Sexual abuse of an inmate and sexual harassment of an inmate are prohibited.

A. "Sexual abuse" includes—

1. Sexual abuse of an inmate *by another inmate*; and
2. Sexual abuse of an inmate *by a staff member, contractor, or volunteer*.

B. Definitions

1. "Inmate" means any person incarcerated or detained in the jail;
2. "Staff" means an agency employee;
3. "Contractor" means a person who provides services on a recurring basis pursuant to a contractual agreement with the agency; and
4. "Volunteer" means an individual who donates time and effort on a recurring basis to enhance the activities and programs of the agency.

C. Sexual abuse of an inmate *by another inmate* includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;

2. Contact between the mouth and the penis, vulva, or anus;
3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
4. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

D. Sexual abuse of an inmate *by a staff member, contractor, or volunteer* includes any of the following acts, with or without consent of the inmate, detainee, or resident:

1. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
2. Contact between the mouth and the penis, vulva, or anus;
3. Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
4. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
5. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
6. Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described in paragraphs (1)-(5) of this section;
7. Any display by a staff member, contractor, or volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident, and

8. "Voyeurism" by a staff member, contractor, or volunteer.

"Voyeurism" by a staff member, contractor, or volunteer means an invasion of privacy of an inmate by \_\_\_\_\_ for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in his or her cell to perform bodily functions; requiring an inmate to expose his or her buttocks, genitals, or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions.

E. "Sexual harassment" includes—

1. Sexual harassment of an inmate *by another inmate*; and
2. Sexual harassment of an inmate *by a staff member, contractor, or volunteer*.

F. Sexual harassment of an inmate *by another inmate* includes:

Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature *by an inmate* directed toward another.

G. Sexual harassment of an inmate *by a staff member, contractor, or volunteer* includes:

Repeated verbal comments or gestures of a sexual nature to an inmate *by a staff member, contractor, or volunteer*, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

115.11(a)-4

## H. Sanctions for Individuals Found to have participated in Sexual Abuse or Harassment

### 1. Disciplinary Sanctions for Staff [DOJ Standards §115.76]

a. Staff will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

b. Termination will be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

c. Disciplinary sanctions for violations of Washington County Sheriff's Office policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

d. 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, will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

### 2. Corrective Action for Contractors and Volunteers [§115.77]

a. Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

b. The Washington County Sheriff's Office will take appropriate remedial measures and will consider whether to prohibit further contact with inmates or banning from operating in the Jail in the case of any violation of Washington County Sheriff's Office sexual abuse or sexual harassment policies by a contractor or volunteer.

### 3. Disciplinary Sanctions for Inmates [DOJ Standards §115.78]

a. Inmates will be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

b. Sanctions will be 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.

c. The disciplinary process will consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

d. If the Washington County Sheriff's Office is able to offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the Jail will consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

e. The Washington County Sheriff's Office may discipline or charge criminally if appropriate, an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

f. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident, even if an investigation does not establish evidence sufficient to substantiate the allegation.

#### 115.11(b) Policy 200

Detention Division – The Detention Division is commanded by the Undersheriff whose primary responsibility is to provide general management, direction and control for the Detention Division. The Detention Division consists of the detention facility staff and Transport Sections. The Detention Division is supervised by a captain and two lieutenants.

The Detention Division captain is designated at the PREA Coordinator and one lieutenant has been designated at the PREA Compliance Manager. The PREA Compliance Manager reports directly to the PREA Coordinator.

#### Interviews:

PREA Coordinator

PREA Compliance Manager

Interviews conducted with the PREA Coordinator and PREA Compliance Manager confirm they both have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

#### Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard requiring a zero-tolerance policy toward sexual abuse and sexual harassment and the designation of a PREA Coordinator and PREA Compliance Manager. No corrective action is required.

## Standard 115.12: Contracting with other entities for the confinement of inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.12 (a)

- 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.)  Yes  No  NA

## 115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Contracts for the confinement of inmates
- Washington County Sheriff's Office Policy. 606
- WCSO Memo

#### 115.12(a)

- (c) Ensuring that any contract for the confinement of Washington County Sheriff's Office detainees or inmates includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.87 (28 CFR 115.12).

#### Interviews:

- Administrative (Human Resources) staff

According to a memo dated April 19, 2019, WCSO has entered into 10 contracts for the confinement of inmates since the last PREA audit. WCSO currently does not have inmates housed at other facilities.

WCSO contracts with other agencies to house their county sentenced population when overcrowded. Yuma County, Archuleta County, City of Loveland, Larimer County, Boulder County, Pueblo County and Cheyenne County do not require compliance with the standards; however, WCSO agrees to comply with the standards.



WCSO contracts with the Colorado Department of Corrections, United States Marshals Service and Department of Homeland Security/ICE, which requires WCSO to allow the contractors to monitor compliance with the PREA standards.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the agency is fully compliant with this standard regarding contracting with other entities for the confinement of inmates.

## Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.13 (a)

- 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?
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No  NA

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?  Yes  No
- 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  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  Yes  No

#### 115.13 (b)

- 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.)  
 Yes  No  NA

#### 115.13 (c)

- 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  No
- 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  No
- 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  No

#### 115.13 (d)

- 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  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No
- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office Policy. 606
- Facility staffing plan
- Operation Guideline
- Daily Population reports
- WCSO Memo
- Washington County Sheriff's Office Email
- WCSO Outline, prevention and detection
- WCSO SOP PAGE 5
- WCSO unannounced round log

#### 115.13(a)

- (b) Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, in order to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year (28 CFR 115.13).

WCSO revised the current staffing plan on March 3, 2019 and corrected the revisions on May 10, 2019. The staffing plan is predicated on average daily number of 220 inmates.

#### 115.13(b) Operational Guidelines

WCSO has developed a method to track and monitor deviations from the facility staffing plan. Each supervisor is required to complete a Staff Report Form and forward to the Captain. The supervisor is required to call the on-call supervisor to make notification and to get a replacement for the call-in. The supervisor is required to document the deviation from the staffing plan on the Washington County Staffing Report, and the report should be forwarded to the Captain for signatures, or the Undersheriff if the Captain is not available.

A memo dated April 30, 2019 indicates, each time the staffing plan is not complied with, the facility documents and justifies all deviations from the Staffing Plan. The memo shows there have been zero deviations from the staffing plan. WCSO will call in other staff members to cover any shift if the staffing plan is not complied with, due to sickness or vacation.

#### 115.13(c)

WCSCO conducted a staffing plan review on March 5, 2019. This was confirmed and verified through a staffing plan attendance form with representatives from the administrative level to support staff such as medical staff. The staffing plan will be reviewed in 2020.

115.13(d)

B. Unannounced Rounds [DOJ §115.13(D)]

Supervisors shall conduct and document unannounced rounds covering all shifts, and all areas of the facility, to identify and deter staff sexual abuse and harassment. Washington County Sheriff's Office policy prohibits staff members who are aware of these rounds from alerting other staff as to when or where these rounds are occurring, unless related to the legitimate operational needs of the facility.

The PREA Coordinator will determine how and when the unannounced rounds will be conducted and will review all documentation from the rounds.

An email was sent to intermediate-level and higher staff instructing them that Sergeants and Lieutenants are required to conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The Control Operator is required to log and enter every location that they observe the Supervisor accessing. The unannounced rounds are required to be completed and documented twice every shift.

Interviews:

- Undersheriff
- PREA Coordinator
- PREA Compliance Manager
- Intermediate- or higher-level facility staff

The PREA Coordinator and PREA Compliance Manager both confirm they participated in the staffing plan review meeting on March 5, 2019. The meeting involved reviewing, collaborating and updating the staffing plan to prevent sexual abuse and sexual harassment.

All interviews as well as a review of documentation confirm the unannounced rounds are conducted as required. The documentation shows the checks are completed at variable times, by the appropriate supervisors.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding supervision and monitoring. No corrective action is required.

## Standard 115.14: Youthful inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- 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].)  Yes  No  NA

### 115.14 (b)

- 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].)  Yes  No  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].)  Yes  No  NA

### 115.14 (c)

- 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].)  Yes  No  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].)  Yes  No  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].)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Agency Policy

#### 115.14

Washington County does not house any inmates under the age of 18. Youthful inmates are processed outside of the facility. Upon the screening with Juvenile Screener, they are transported to a juvenile detention facility.

Interviews with the Undersheriff, PREA Coordinator and PREA Compliance Manager confirms the facility does not house youthful offenders. During the facility tour an area of the facility that was designated as the housing area for juveniles in the past is now converted to an area to house inmates when/if the facility is overcrowded and also to also conduct parole hearings. During the tour there were no youthful offenders or inmates housed in the area.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding youthful inmates. No corrective action is required.

## Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.15 (a)

- 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  No

### 115.15 (b)

- 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  No  NA
- 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 facility does not have female inmates.)  Yes  No  NA

### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.)  Yes  No  NA

### 115.15 (d)

- 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  No

- 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  No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?  Yes  No

#### 115.15 (e)

- 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  No
- 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  No

#### 115.15 (f)

- 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  No
- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Protocol for Prevention, Detection, and Response

- Outline for Prevention, Detection, and Response
- Memo
- Washington County SOP Protocol
- Map and Log of cameras
- Training curriculum
- Training Roaster/ Certificates

115.15(a)

D. Cross Gender Viewing and Searches/Searches of Transgender Inmates [DOJ §115.15]

1. Searches

a. The facility shall not conduct cross-gender “strip searches” (meaning a search that requires a person to remove or arrange clothing so as to permit a visual inspection of their breasts, buttocks, or genitalia) or cross-gender “visual body cavity searches” (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners

“Medical practitioner” means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice.

115.15(b)

b. This facility shall not permit cross-gender “pat-down” searches of female inmates, unless a female Deputy is not available. “Pat-down” search means a running of the hands over the clothed body of an inmate by an employee to determine whether the individual possesses contraband. The facility shall not restrict female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

c. This facility shall not conduct cross-gender *strip* searches and *body cavity* searches of inmates and will document all cross-gender *pat-down* searches of female inmates.

Pat searches are conducted only by an officer that is the same gender as the individual being searched

115.15(d)

2. Viewing [DOJ §115.15 (d)]

a. The facility shall enable 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.

b. Staff members of the opposite gender shall announce their presence when entering an inmate housing unit

A memo dated February 8, 2019 state, “Washington County has current SOP Protocols addressing this subject, II. D. 8., IV. D. 2. There are 72 Video Cameras within the facility that are monitored from the Control Room. The views in private areas for inmates are blocked to allow privacy and the recorded images are recorded block as well. The views from the control room and from outside of the housing units does not allow staff to view while in the showers, or restroom facilities. Inmate population is allowed the ability to close the cell doors while using the restroom within the housing units. In the Booking Area, magnets to block views of the showers for added privacy.”



#### 115.15(e)

d. No staff member shall conduct a search of a transgender or intersex inmate solely for the purpose of determining genital status. If the inmate's genital status is unknown, it may be determined 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.

There were zero searches conducted to physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. During the onsite audit there were no inmates identified as transgender or intersex to explain the facility's search procedure that was followed during their stay at the facility.

#### 115.15(f)

Training records from February 2019 and random staff interviews, confirm the facility conducted search training in the past 12 months. The facility used a training curriculum developed in 2015 by the National PREA Resource Center titled, "Guidance in Cross-Gender and Transgender Pat Searches". The PAQ and training roster show 100% of the staff responsible for conducted searches have been trained.

#### Interviews:

- Non-Medical Staff Involved in Cross-Gender Strip or Visual Searches
- Random staff
- Random Inmates

The PAQ indicates there were zero cross-gender strip searches or visual body cavity searches of inmates in the past 12 months. Per the WCSO policy cross-gender searches are prohibited even in exigent circumstances. Given that such searches are prohibited there was no documentation to review to confirm cross-gender searches are not a practice in the facility. However, interviews with staff and inmates confirm cross-gender searches are not a practice in the facility.

#### Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is compliant with this standard regarding limits to cross-gender viewing and searches. No corrective action is required.

## **Standard 115.16: Inmates with disabilities and inmates who are limited English proficient**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.16 (a)**

- 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  No
- 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  No

- 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  No
- 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  No
- 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  No
- 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  No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  Yes  No
- 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  No
- 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 intellectual disabilities?  Yes  No
- 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  No
- 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  No

#### 115.16 (b)

- 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  No

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?
  - Yes  No

### 115.16 (c)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

#### Documents reviewed:

- WCSO PAQ
- Washington County Policy
- SOP Protocol for Prevention, Detection, and Response
- Contracts with interpreters
- Staff Assistance
- Posters/ Brochures/ Kiosk /DHS Poster

#### 115.16(a)

##### Policy 602

This office will take all reasonable steps to accommodate inmates with disabilities while they are in custody and will comply with the ADA and any related state laws. Discrimination on the basis of disability is prohibited. This office prohibits all forms of discrimination based on disability.

- (e) Establishing guidelines for services, programs and activities for the disabled and ensuring that inmates with disabilities 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 (28 CFS 115.16).

#### 115.16(b)

##### 2. Inmates Who Have Limited English Proficiency [DOJ § 115.16(b)]

Washington County Sheriff's Office shall take reasonable steps to ensure meaningful access to all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially.

A memo dated February 11, 2019, states, "Washington County staff will assist the inmate in contacting sworn personnel who are bi-lingual, interpreters, etc. This will be done to ensure access to all aspects to prevent, detect, and respond to sexual abuse and sexual harassment involving inmates who are limited English proficient."

115.16(c)

Policy 606

Should an investigation involve inmates who have disabilities or who have limited English proficiency, the first responder shall not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise inmate safety, the performance of the first responder duties or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).

The PAQ indicates there were zero instances in the past 12 months where interpreters, readers or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmates safety, the performance of first-response duties or the investigation of the inmates allegations.

Interviews:

- Sheriff
- Intake staff

During the onsite audit there were zero inmates identified as limited English speaking. There was one inmate identified as having a cognitive disability. During the interview with the inmate they reported receiving PREA information in writing and by watching a video. The PREA video was shown to the inmate within one hour of intake in the intake area. The inmate also reported seeing posters posted throughout the facility that instructs the inmates on how to report sexual abuse and sexual harassment allegations.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmates with disabilities and inmates who are limited English Proficient. No corrective action is required.

## Standard 115.17: Hiring and promotion decisions

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### 115.17 (a)

- 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  No

- 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  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No
- 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  No
- 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  No
- 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 question immediately above?  Yes  No

#### 115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?  Yes  No
- 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  No

#### 115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check?  Yes  No
- 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  No

#### 115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  Yes  No

#### 115.17 (e)

- 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  No

#### 115.17 (f)

- 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  No
- 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  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  Yes  No

#### 115.17 (h)

- 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  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ

- Washington County policies 108/901
- Application
- Job Posting
- Washington County Sheriff's Office Memo
- Washington County Policy 303
- Washington County Policy 302
- Washington County Application
- Contract workers backgrounds.
- List of Contract workers with Inmate contact
- Memo reflecting change of policy
- Roster of employees (More than five years background/criminal history with Records)
- Evaluation Form
- Volunteer Contract
- Memo Regarding Release of Information

115.17(a)

Washington County Sheriff's Office Standard Operating Procedure; Policy 302

**III. POLICY:** It is the policy of the Washington County Sheriffs' Office to recruit, hire and retain the most qualified personnel in accordance with established Washington County Policy, in accordance with applicable Equal Employment Opportunity Commission (EEOC) and Americans with Disabilities Act (ADA) guidelines. All guidelines and procedures relating to the hiring or re-hiring of sworn and civilian employees are subject to change and are administered at the discretion of the Sheriff, Undersheriff or a designee of. All hiring's or selections are at the discretion and approval of the Sheriff and Undersheriff.

The Washington County Sheriff's Office will follow the following standards when hiring and new employee under 115.17 of the National Prison Rape Elimination Act which states:

§ 115.17 Hiring and promotion decisions

(a) The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who—

(1) 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);

(2) 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

(3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

115.17(b)

(b) The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

A signed memo dated January 28, 2016, indicates WCSO will take into consideration any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor. A criminal background check is performed on every Washington County employee, contracted employee, and volunteer that as contact with any inmate.

115.17(c)

(c) Before hiring new employees who may have contact with inmates, the agency shall:

(1) Perform a criminal background records check; and

(2) 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.

In the past 12 months, WCSO has hired 14 persons who may have contact with inmates who also had a criminal background records check completed.

115.17(d)

(d) The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.

In the past 12 months, WCSO has hired 20 individuals who provide contract services where a criminal background check was conducted.

11517(e)

(e) The agency shall 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.

(f) The agency shall 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

115.17(g)

(g) Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

A review of a Washington County Sheriff's Office employment application shows all applicants are asked if there are any incidents in the person's life which if known might disqualify the applicant whether or not they were directly involved, which might be discovered by subsequent investigations.

115.17(f)

(h) Unless prohibited by law, the agency shall 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.

Additionally, WCSO policy 303 states, "Consistent with Federal, State, and local law, make 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."

Interviews:

- Administrative (Human Resources) staff

An interview with the human resources representative indicates all applicants grant permission by signing a document granting WCSO the ability to conduct a background check. When an applicant is offered employment, they are required to have a fingerprint background check completed. Volunteers and contractors complete the same background check process as county employees. Disqualifying offenses include felonies convictions, sex offenses, and violent offenses. When it is discovered that an employee has a disqualifying offense they can be terminated.



WCSO conducts background checks on all employees every year. The annual background checks include a Colorado Bureau of Investigation (CBI) check that does not include a fingerprint check.

Per policy, the WCSO lieutenants and sergeants are allowed to share employment information with other institutions when concerning former employees.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmates with disabilities and inmates who are limited English Proficient. No corrective action is required.

## Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.18 (a)

- 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.)  
 Yes  No  NA

### 115.18 (b)

- 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.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- New medical contract November 2016
- Slider Device Replacement November 2016
- Maintenance to Facility Floors August 2017
- Kubl Group Installed 6 New Cameras
- Kubl Group Installed New Camera in Holding Cell 1
- Implementation, Interface, Training on Electronic CorEMR

115.18(a)

Washington County in November 2016 entered into a new contract Southern Health Partners for Medical and Mental Health for the population of Washington County Justice Center.

Washington County in November 2016 contracted with KUBL Group to replace the Slider Devices in the doors of the facility. While installing the new control board within the facility, it was discovered that there was a wiring issue between the control board and the cell doors within the housing units.

In August of 2017, Washington County contracted with a company to repair cracks, remove paint, and polish the facility floors.

115.18(b)

Washington County contracted with KUBL Group to install 6 new facility cameras. There are 5 new exterior cameras and 1 new interior camera. Maps are included.

KUBL Group, in March 2018, installed a new camera in Holding Cell 1. This camera was replaced due to water damage. The camera is essential for the purpose of PREA.

In February 2016, Washington County purchased the software for Electronic Medical Records (CorEMR). In January 2017, Washington County completed the interface with the jail management system and began training to go paperless with the medical records in the facility.

Interviews:

- Sheriff
- Undersheriff

The facility did not undergo an expansion projects in the past 12 months. According to the Sheriff, there is no immediate need to expand any areas of the facility. The administrators are always looking for areas to install cameras to increase safety. There are future plans to update the intercom system. The current system is outdated.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the agency and facility is fully compliant with this standard regarding upgrades to facilities and technologies. No corrective action is required.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.21 (a)

- 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  No  NA

#### 115.21 (b)

- 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.)  Yes  No  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  No  NA

#### 115.21 (c)

- 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  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
- 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  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

#### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No

- 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  No  NA
- Has the agency documented its efforts to secure services from rape crisis centers?  Yes  No

#### 115.21 (e)

- 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  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

#### 115.21 (f)

- 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  No  NA

#### 115.21 (g)

- Auditor is not required to audit this provision.

#### 115.21 (h)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Washington County SOP Protocol V. Responding F. Investigations sec v-f
- Washington County Policy 901.5
- Washington County Policy 901.3
- MOU with Sara House
- Copies of Brochures
- Copies of Poster
- Victim Advocate paperwork
- Washington County MOU with Morgan County
- Copies of Victim Advocate for the 13<sup>th</sup> Judicial Spanish and English.

115.321(a)

WCSO Standard Operating Procedure

F. Investigation of Incidents [DOJ §§ 115.21(a)(b)(c)(f) and(h), 115.22, 115.71, 115.72, 115.73 and 115.86]

1. Washington County Sheriff's Office shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. [§ 115.22]

2. It is the Washington County Sheriff's Office policy 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. Washington County Sheriff's Office shall publish this policy on its website at [www.washcountysheriff.com] and make the policy available through other means. Washington County Sheriff's Office shall document all such referrals. If a separate entity is responsible for conducting criminal investigations, such publication will describe the responsibilities of both Washington County Sheriff's Office and the investigating entity. [DOJ § 115.22]

WCSO CO Policy Manual

901.5.3 Administrative Investigations

Administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse. The departure of the alleged abuser or victim from the employment or control of this office shall not be used as a basis for terminating an investigation (28 CFR 115.171).

Allegations involving staff on inmate sexual misconduct will require a criminal investigation that is conducted by the Morgan County Sheriff's Office. WCSO will complete the administrative investigation.

Allegations involving inmate on inmate will result in both the criminal and administrative investigation being conducted by a trained WCSO investigator.

115.21(c)

WCSO provided an MOU with SARA (Sexual Assault Response Advocate), which shows inmate victims of sexual assault are provided a forensic exam after there is a determination by law enforcement and the facility that evidence collection is necessary. WCSO agrees to pay the charge of \$500.00 per exam, which indicates the forensic exams are provided at no cost to the inmates.

The PAQ shows there were zero allegations requiring a medical exam in the past 12 months.

#### 115.21(d)

The MOU states, SARA will provide immediate advocacy, support ad crisis intervention to the survivor or victim via a confidential phone line from a private location. The advocate can respond in person to the jail, when possible, to provide additional advocacy, emotional support and information.

115.21(e) The MOU states, SARA will meet with the survivor or victim as privately as possible, as soon as possible after his or her arrival to the Washington County Medical Unit. The advocate will inform the survivor or victim of the right for a victim to be present during the medical forensic exam and the investigative interviews.

#### Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Medical staff
- SANE (SARA House)
- Random staff

The facility medical staff report upon receiving a sexual abuse allegation they would immediately contact and make arrangements with SARA House regarding a sexual assault forensic exam. Per the MOU, the SANE nurse would go to the WCSO medical unit to complete a forensic exam. An interview with a representative from SARA House state they would go to the jail as agreed upon to conduct a forensic exam in the facility medical clinic.

Interviews with the staff indicate if there is an allegation of sexual abuse during business hours the PREA Coordinator or PREA Compliance Manager would immediately be notified to initiate support services and a forensic exam for the inmate. After-hours the supervisor on duty would make immediate notifications and receive guidance from the on-call administrator with how to proceed.

Interviews with random staff demonstrated they understand their responsibility to secure the scene until physical evidence can be collected by investigators.

#### Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding evidence protocol and forensic medical examinations. No corrective action is required.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.22 (a)**

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  Yes  No

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Yes  No

#### 115.22 (b)

- 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  No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Yes  No
- Does the agency document all such referrals?  Yes  No

#### 115.22 (c)

- 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  No  NA

#### 115.22 (d)

- Auditor is not required to audit this provision.

#### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Sample investigation reports of sexual abuse or sexual harassment.
- Washington County Sheriff's Office Policy 901

- Washington County SOP Protocol V. Responding, F. Investigation of Incidents
- MOU with Morgan County

115.22(a)

Washington County Sheriff's Office, CO Policy Manual

- (g) Ensuring that detainees with limited English proficiency and disabilities have an equal opportunity to understand and benefit from efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes, as appropriate, access to interpreters and written materials in formats or through methods that provide effective communication to those with disabilities (e.g., limited reading skills, intellectual, hearing or vision disabilities) (28 CFR 115.16).

Washington County Sheriff's Office, Standard Operation Procedure

F. Investigation of Incidents [DOJ §§ 115.21(a)(b)(c)(f) and(h), 115.22, 115.71, 115.72, 115.73 and 115.86]

1. Washington County Sheriff's Office shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. [§ 115.22]

2. It is the Washington County Sheriff's Office policy 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. Washington County Sheriff's Office shall publish this policy on its website at [www.washcountysheriff.com] and make the policy available through other means. Washington County Sheriff's Office shall document all such referrals. If a separate entity is responsible for conducting criminal investigations, such publication will describe the responsibilities of both Washington County Sheriff's Office and the investigating entity. [DOJ § 115.22]

The WCSO PAQ and a memo dated May 1, 2019 show there were three allegations of sexual abuse and sexual harassment in the last 12 months. All three were referred for criminal investigation, and the investigations have been completed. There were zero allegations of sexual abuse or sexual harassment that resulted in an administrative investigation.

Interviews:

- Sheriff
- PREA Coordinator
- Investigative staff

When there is a sexual abuse allegation, the allegation is referred to the PREA Coordinator. The allegation is then forwarded to the investigator who will then determine next steps. Part of the investigation will involve reviewing video footage and interviewing all witnesses (victim, perpetrator, staff and inmates).

The first responder would separate the victim from the perpetrator, which could include placing a staff member on administrative leave or limit their contact with the victim or all inmates. If the allegation involves another inmate, the perpetrator could be placed in segregated housing during the allegation.

If an allegation involves a Colorado DOC inmate, a DOC investigator will conduct the investigation.0

Conclusion:



Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding policies to ensure referrals of allegations for investigations. No corrective action is required.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- 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  No
- 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  No
- 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  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- 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  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- 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  No
- 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  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- 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  No

### 115.31 (c)

- Have all current employees who may have contact with inmates received such training?  Yes  No
- 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  No
- 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  No

### 115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Policy 902.9
- PREA Training Curriculum
- Memo addressing training Gender
- Washington County SOP Protocol VI. Training 4
- Signed acknowledgments

#### 115.31(a)

Washington County Sheriff's Office, CO Policy Manual

## 901.9 TRAINING

All employees, volunteers and contractors who may have contact with detainees shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Undersheriff shall be responsible for developing and administering this training as appropriate, covering at a minimum (28 CFR 115.131):

- The Office's zero-tolerance policy and detainees right to be free from sexual abuse and sexual harassment, and from retaliation for reporting sexual abuse or harassment.
- The dynamics of sexual abuse and harassment in confinement settings, including which detainees are most vulnerable.
- The right of detainees and staff members to be free from sexual abuse and sexual harassment, and from retaliation for reporting sexual abuse or harassment.
- Detecting and responding to signs of threatened and actual abuse.
- Communicating effectively and professionally with all detainees.
- Compliance with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

A review of the PowerPoint training curriculum shows every training module is included in the required training. WCSO has adopted the training curriculum developed by the PREA Resource Center.

WCSO houses male and female inmates; therefore, the training is tailored to meet the unique needs of men and women.

115.31(c) WCSO employs 41 staff who may have contact with inmates. According to the PAQ and signed training acknowledgments, as well as interviews with staff the auditor was sufficiently satisfied that the staff receive annually PREA training and refreshers as needed. The training includes a review of the standard operating procedures regarding PREA, search policies and procedures, and respectful communication with LGBTI inmates. The staff were able to communicate their role and responsibility if they were to receive a disclosure and what protective measures, they would take to ensure the investigator has the ability to conduct a thorough investigation that includes the collection of evidence, when necessary.

Interviews:

- PREA Coordinator
- Random staff
- Medical and Mental Health staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility fully compliant with this standard regarding employee training. Training is conducted annually, all employees receive training tailored to the unique needs and attributes of inmates of both genders, and refresher training is available on an ongoing basis. No corrective action is required.

## Standard 115.32: Volunteer and contractor training

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### 115.32 (a)

- 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  No

### 115.32 (b)

- 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  No

### 115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Training curriculum for volunteers and contractors
- Medicals PREA policy
- Training curriculum from 115.32 (a)-1
- Washington County Memo.
- Signed acknowledgments

#### 115.32(a)

Washington County Sheriff's Office, CO Policy Manual  
901.9 TRAINING

All employees, volunteers and contractors who may have contact with detainees shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Undersheriff shall be responsible for developing and administering this training as appropriate, covering at a minimum (28 CFR 115.131):

- The Office's zero-tolerance policy and detainees right to be free from sexual abuse and sexual harassment, and from retaliation for reporting sexual abuse or harassment.
- The dynamics of sexual abuse and harassment in confinement settings, including which detainees are most vulnerable.
- The right of detainees and staff members to be free from sexual abuse and sexual harassment, and from retaliation for reporting sexual abuse or harassment.
- Detecting and responding to signs of threatened and actual abuse.
- Communicating effectively and professionally with all detainees.

Compliance with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

WCSO provided a list of volunteers and contractors (Trinity Services, Southern Health Partners, Jail Based Services and Centennial Mental Health) who provide services in the facility. The Southern Health Partners are the contract providers that provide medical services in the facility. Southern Health Partners conduct a company PREA training; the staff also receive PREA training through WCSO. At the conclusion of the training the staff sign a training acknowledgement form stating they read and have received PREA information and understand the information on how to prevent and report sexual misconduct, sexual violence and sexual abuse and will abide by all policies accordingly.

Volunteers and other contract providers sign a separate training acknowledgment form that explains their responsibility as a volunteer and contractor regarding PREA and the WCSO zero-tolerance policy. The acknowledgement form states, the volunteer has received training on Prison Rape Elimination Act (PREA) from the Washington County Justice Center PREA Coordinator. By signing this document, I am verifying that I understand the training that has been received and my affirmative duty to report.

Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Volunteers and contractors

Interviews confirm volunteers and contractors are trained on their responsibilities regarding sexual abuse and sexual harassment prevention, detection and response policies and procedures. The level and type of training provided to volunteers and contractors is based on the services those individuals provide and the level of contact they have with inmates. All volunteers and contractors who have contact with inmates will be notified of the WCSO zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding volunteer and contractor training. No corrective action is required.

## **Standard 115.33: Inmate education**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### **115.33 (a)**

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  Yes  No

### 115.33 (b)

- 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  No
- 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  No
- 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  No

### 115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)?  Yes  No
- 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  No

### 115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  Yes  No

### 115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?  
 Yes  No

### 115.33 (f)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Inmate handbook
- Signed Inmate education verifications
- Washington County SOP Protocol
- Inmate education materials (posters brochures)
- Memo

#### 115.33(a)

Washington County Sheriff's Office, Standard Operating Procedure

#### B. Inmate Orientation and Education [DOJ §115.33]

1. During the intake process, inmates will receive information explaining the Washington County Sheriff's Office zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.
2. Within 30 days of intake, Washington County Sheriff's Office will provide comprehensive education to inmates either in person regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding the Washington County Sheriff's Office policies and procedures for responding to such incidents.
3. Current inmates who have not received such education will be educated within one year of the effective date of the PREA standards – by August 20, 2013.

4. The Washington County Sheriff's Office will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.
5. Washington County Sheriff's Office will maintain documentation of inmate participation in these education sessions.
6. In addition to providing such education, Washington County Sheriff's Office will ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Random inmates

Inmate interviews confirm during intake they receive and sign an acknowledgment that they received the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment information. The PAQ shows 2,393 inmates received the PREA information at intake and 839 received the comprehensive education on their rights to be free from both sexual abuse and harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake in the past 12 months.

Inmates informed the auditor that they receive written PREA information and watch a video. The video has caption that provides the information for an inmate identified as deaf or hard of hearing. The video also has the capacity to educate inmates with limited reading capacity.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmate education. No corrective action is required.

## Standard 115.34: Specialized training: Investigations

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.34 (a)

- 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  No  NA

#### 115.34 (b)

- 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  No  NA



- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA
  
- 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  No  NA
  
- 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  No  NA

### 115.34 (c)

- 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  No  NA

### 115.34 (d)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Investigator PREA Training Curriculum from Broomfield
- Investigator PREA Training Curriculum from Broomfield
- Washington County Policy 901.9
- Training Records maintained in Personnel file

115.34(a)

#### 901.9 TRAINING

Investigators assigned to sexual abuse investigations shall also receive training in conducting such investigations in confinement settings. Training should include (28 CFR 115.134):

- Techniques for interviewing sexual abuse victims.
- Proper use of Miranda and Garrity warnings.
- Sexual abuse evidence collection in confinement settings.
- Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The Undersheriff shall maintain documentation that employees, volunteers, contractors and investigators have completed required training and that they understand the training. This understanding shall be documented through individual signature or electronic verification.

WCSO provided the auditor with the training curriculum and

Interviews:

- PREA Coordinator
- Investigative staff

WCSO demonstrated compliance with this standard by providing training certificates showing two facility investigators have received the appropriate training.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding specialized training for investigations. No corrective action is required.

## Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.35 (a)

- 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  No  NA
- 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  No  NA

- 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  No  NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  Yes  No  NA

### 115.35 (b)

- 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  No  NA

### 115.35 (c)

- 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  No  NA

### 115.35 (d)

- 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  No  NA
- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- Agency Policy
- Medical & Mental Health specialized training curriculum memo
- Relevant Training records
- Medical staff list
- Training roster
- Washington County Sheriff's Office Memo
- Training logs
- Training logs from 115.31 & 115.32

115.35(a)

Policy and Procedure Manual for Health Services in Jails

Policy:

SHP medical staff will respond with health interventions upon the report of a sexual assault against a patient.

SHP prohibits any acts of sexual misconduct, sexual violence and sexual abuse by inmates, staff, contractors/vendors, volunteers or any SHP employee. An offender alleging victimization of a sexual manner will be provided the same level of law enforcement service, treatment and care as non-offenders.

The policy is comprehensive and includes sexual misconduct definitions, which includes what constitutes an unauthorized relationship, how to prevent misconduct and reporting procedures.

The facility medical staff does not conduct forensic medical exams; therefore, there are no SANE nurses required to have received the necessary training.

Interviews:

- PREA Coordinator
- Medical and mental health staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding specialized training for medical and mental health care. No corrective action is required.

## **SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS**

### **Standard 115.41: Screening for risk of victimization and abusiveness**

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.41 (a)

- 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  No
- 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  No

### 115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  
 Yes  No

### 115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?  
 Yes  No

### 115.41 (d)

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No

- 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  No
- 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  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

- 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  No
- 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  No
- 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  No

#### 115.41 (f)

- 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  No

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a request?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?  Yes  No
- 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  No

#### 115.41 (h)

- 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  No

#### 115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PREA
- Washington County SOP Protocol page 7
- Initial Health Intake Screen Form
- Washington County Vulnerability/Victimization/And or Sexually Aggressive Behavior Assessment form
- Washington County Policy
- Records of reassessments of inmates within 30 days of arrival to facility
- WCSO Policy

#### 115.41(a)

#### F. Screening of Inmates

##### 1. Screening for Risk of Victimization and Abusiveness [DOJ §115.41]

- All inmates will be assessed during an intake screening (and upon transfer from another facility) for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.
- Intake screening will ordinarily take place within 72 hours of arrival at the facility and will be conducted by a Jail Deputy during the booking process and the Jail Medical Unit.
- Such assessments shall be conducted using an objective screening instrument.

d. The intake screening shall 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;
- (2) The age of the inmate;
- (3) The physical build of the inmate;
- (4) Whether the inmate has previously been incarcerated;
- (5) Whether the inmate's criminal history is exclusively nonviolent;
- (6) Whether the inmate has prior convictions for sex offenses against an adult or child;
- (7) Whether the inmate is *or is perceived* to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

Note: "Transgender" means a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth. "Intersex" means a person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. "Gender nonconforming" means a person whose appearance or manner does not conform to traditional societal gender expectations.

- (8) Whether the inmate has previously experienced sexual victimization;
- (9) The inmate's own perception of vulnerability; and
- (10) Whether the inmate is detained solely for civil immigration purposes.

e. The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to Washington County Sheriff's Office, in assessing inmates for risk of being sexually abusive.

#### 115.41(c)

The WCSO Vulnerability Assessment Instrument screens for risk of victimization and propensity to engage in behavior as a perpetrator. The assessment also gathers information about an inmates age, offense type, disabilities, sexual orientation and gender identity among other characteristics.

The intake process also involves Southern Health Partners completing a medical screen for all inmates. During the screening process the inmates risk of victimization and propensity to perpetrate on others are assessed.

#### 115.41(f)

Washington County Sheriff's Office Prevention, Detection and Response, Standard Operating Procedure

f. Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility shall reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

#### 115.41(g)



g. An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

115.41(h)

h. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information related to d. (1), (7), (8) and (9) above.

Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Intake staff
- Random inmates

Intake staff report conducting the risk screening within hours of a new inmate's admission into the facility. The intake meeting is conducted in a relatively private area and allows the inmate to answer without fear of being overheard by other inmates. The information is ascertained by interviewing the inmate and the staff member documenting the inmate's responses on the objective risk screening tool. All inmates whose stay at WCSO last 30 days will have a reassessment completed during that time. Should the facility receive collateral information that would impact the inmates risk the assessment will be updated utilizing the reassessment form.

Inmate interviews confirm the intake staff conducted a face-to-face interview with them during the intake process and asked them the pertinent questions. The inmates reported they understood the questions were being asked to make safety and security decisions. All inmates report feeling the staff were professional during the assessment interview process and they agreed to answer the questions and did not feel they would be punished if they refused to participate.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding screening for risk of victimization and abusiveness.

## Standard 115.42: Use of screening information

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### 115.42 (a)

- 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  No
- 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  No

- 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  No
- 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  No
- 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  No

#### 115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate?  Yes  No

#### 115.42 (c)

- 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  No
- 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 present management or security problems?  Yes  No

#### 115.42 (d)

- 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  No

#### 115.42 (e)

- 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  No

#### 115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  Yes  No

#### 115.42 (g)

- 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 decree, legal settlement, or legal judgement.)  Yes  No  NA
  
- 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 decree, legal settlement, or legal judgement.)  Yes  No  NA
  
- 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 solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Vulnerability Assessment Instrument: Risk of Victimization and or Sexually Aggressive Behavior or Risk form
- Washington County Sheriff’s Office policy
- Washington County Memo
- E-FORCE medical

115.42(a)

**2. Use of Information Obtained from Screening [DOJ §115.42]**

a. The Washington County Sheriff's Office shall use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Upon completion of the Booking process and the Initial Intake Form, the booking officer contacts the Sergeant or Supervisor for assistance if there is information obtained that screens the individual as a high risk. In this case the housing and program decisions will be left up to the Sergeant or Supervisor.

115.42(b)

b. The Washington County Sheriff's Office shall make individualized determinations about how to ensure the safety of each inmate.

115.42(c)

c. In deciding whether to assign a transgender or intersex inmate to a housing area for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

d. 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.

Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Intake staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding use of screening information. No corrective action is required.

**Standard 115.43: Protective Custody**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.43 (a)**

- 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  No
- 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  No

#### 115.43 (b)

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No  NA
- If the facility restricts any 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  No  NA
- If the facility restricts any 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  No  NA

#### 115.43 (c)

- 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  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- 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  No
- 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  No

#### 115.43 (e)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Documents reviewed:

- WCSO PAQ
- Washington County Policy
- Washington County Records of housing assignments of inmates at high risk of victimization
- Washington County Sheriff's Office Memo
- Case file and Memo
- Documentation of 30-day reviews

115.43(a)

Washington County Sheriff's Office, Standard Operating Procedures

### 3. Protective Custody [DOJ §115.43]

a. Inmates at high risk for sexual victimization shall not be placed 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. If the Washington County Jail cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for **less than 24 hours** while completing the assessment.

Staff and inmate interviews as well as the PAQ indicate there were zero inmates placed in segregated housing in the past 12 months for longer than 24 hours. Interviews confirm no inmate was placed in segregated housing during the onsite audit phase to protect them from sexual victimization.

b. Inmates placed in segregated housing for this purpose will have access to programs, privileges, education, and work opportunities to the extent possible.

c. If the Washington County Jail restricts access to programs, privileges, education, or work opportunities, it shall document:

- (1) The opportunities that have been limited;
- (2) The duration of the limitation; and
- (3) The reasons for such limitations.

d. The Washington County Jail shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment will not ordinarily exceed a period of 30 days.

e. If an involuntary segregated housing assignment is made pursuant to this section, the Jail will clearly document:

(1) The basis for the facility's concern for the inmate's safety; and

(2) The reason why no alternative means of separation can be arranged.

f. Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding protective custody. No corrective action is required.

## REPORTING

### Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment?  Yes  No
- 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  No
- 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  No

#### 115.51 (b)

- 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  No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No

- Does that private entity or office allow the inmate to remain anonymous upon request?  
 Yes  No
- 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)  
 Yes  No  NA

#### 115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  Yes  No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  
 Yes  No

#### 115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office Policy
- Relevant documentation
- Photos of posters on PREA in booking area
- Department of Homeland Security Poster
- Documentation of verbal reports with in 24hrs in accordance to Washington County Standard Operating Procedure
- Washington County Justice Center Policy

#### 115.51(a)

#### Washington County Sheriff's Office, Standard Operating Procedure



## 1. Inmate Reporting

Ways for inmates to Report §115.51(a), (b) and (c)]:

(2) Washington County Sheriff's Office shall also provide at least one way for inmates to report abuse, harassment, retaliation and staff neglect to a public or private entity that is not part of Washington County Sheriff's Office, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates may report concerns by:

- Reporting directing to the Washington County Sheriff's Office, the Yuma County Sheriff's Office or the District Attorney's Office.
- Reporting to a third party, such as a friend or family member.
- Washington County Detention Center shall provide inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security by calling 1-800-323-8603.

Inmates are made aware of the reporting mechanisms that's posted in the intake area of the facility as well as on the housing units. Also, all inmates receive a brochure during intake which provides information on the different reporting mechanisms. The brochures are available in English and Spanish.

During the facility tour, the auditor observed posters that informed the inmates about the different reporting mechanisms.

115.51(c)

(3) Staff shall accept reports made verbally, in writing, and anonymously. Staff shall document any verbal report within 24 hours.

115.51(d)

c. A Deputy will take a jail report number and document the incident in a written report, and give to the Jail Administrator to privately report sexual abuse and sexual harassment of inmates [DOJ §115.51(d)]

d. Staff can remain anonymous in reporting a PREA incident by writing a report of said incident to the PREA Coordinator and the Investigator of the Washington County Sheriff's Office. This can be handwritten or typed using Microsoft word or by E-mail.

Staff interviews confirm they understand their ability to make a private report to their direct supervisor or to the county administrators.

Interviews:

- PREA Compliance Manager
- Random staff
- Random inmate

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmate reporting. Inmates are provided with numerous ways to report both internally and externally. No corrective action is required.

## Standard 115.52: Exhaustion of administrative remedies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.52 (a)

- 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  No

#### 115.52 (b)

- 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  No  NA
- 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  No  NA

#### 115.52 (c)

- 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 this standard.)  Yes  No  NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (d)

- 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  No  NA
- 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  No  NA
- 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  No  NA

### 115.52 (e)

- 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  No  NA
- 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  No  NA
- 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  No  NA

### 115.52 (f)

- 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  No  NA
- 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  No  NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  
 Yes  No  NA
- 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  No  NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA

### 115.52 (g)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Standard Operating Procedure
- Kiosk of PREA complaint
- Inmate handbook
- Washington County Sheriff's Office Memo

#### 115.52(a)

Washington County Sheriff's Office, Standard Operating Procedures

b. Inmate Grievances [DOJ] § 115.52 (a), (b), (c), (e) and (g)]

(1) Washington County Sheriff's Office shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse.

(2) Washington County Sheriff's Office shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

The PAQ reports that in the past 12 months, there have been zero grievances filed alleging sexual abuse. The inmates have the ability to file a grievance through the electronic Kiosk system. The PREA Coordinator demonstrated how the clients can access the electronic grievance form using the kiosk system. Once the form is electronically submitted the grievance is available for review by the supervisors and administrators for a response. Grievances alleging sexual abuse or sexual harassment are typically referred to the PREA Compliance Manager and PREA Coordinator to address.

#### 115.52(b)

(1) Washington County Sheriff's Office shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse.

(2) Washington County Sheriff's Office shall not require an inmate to **use any informal grievance** process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

115.52(c)

(3) Washington County Sheriff's Office shall ensure that—

(a) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and

(b) Such grievance is not referred to a staff member who is the subject of the complaint.

115.52(d)

(4) Washington County Sheriff's Office shall issue a final 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 shall not include time consumed by inmates in preparing any administrative appeal.

WCSO has had zero grievances alleging sexual abuse that involved extensions because a final decision was not reached within 90 days.

115.52(e)

3. Rules for Third Parties to Report Abuse and to Assist Inmates with Grievances

The Washington County Sheriff's Office has established the following method to receive third-party reports of sexual abuse and sexual harassment and will distribute publicly information on the Sheriff's Office website, on how to report sexual abuse and sexual harassment on behalf of an inmate: [§115.54]

- 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. If the inmate declines to have the request processed on his or her behalf, Washington County Sheriff's Office will document the inmate's decision. [115.52 (e)(2) and (3)]

There have been zero grievances alleging sexual abuse filed by inmates in the past 12 months. No inmate declined third-party assistance; therefore, no grievances containing documentation of the inmates' decision to decline was available. The Washington County Detention Facility has Zero incidents containing documentation of the inmates' decision to decline.

115.52(f)

2. Emergency Grievances [DOJ §115.52 (f)]

a. The Washington County Sheriff's Office has established the following procedure for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

- Verbal or written grievance to any Jail staff member or member of the Washington County Sheriff's Office.
- Verbal or written notification to Victim Advocate of the Washington County Sheriff's Office.
- Verbal or written notification to outside agency, or third party.

b. After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, Washington County Sheriff's Office shall immediately forward the grievance (or any portion of it that alleges the substantial risk of imminent sexual abuse) to a level of review at which

immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final decision within 5 calendar days.

c. The initial response and final decision shall document the Washington County Sheriff's Office determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

WCSO received zero emergency grievances alleging substantial risk of imminent sexual abuse in the past 12 months.

115.52(g)

(7) Washington County Sheriff's Office may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

In the past 12 months, WCSO received zero grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding exhaustion of administrative remedies. No corrective action is required.

## Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.53 (a)

- 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  No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.)  Yes  No  NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

### 115.53 (b)

- 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  No

### 115.53 (c)

- 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  No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff’s Office Policy
- Handouts, Posters, and Video at booking.
- Inmates Handbook
- Inmate Brochures
- MOU between Washington County Sheriff’s Office and Centennial Mental Health

#### Interviews:

- Random inmates

#### 115.53(a)

Washington County Sheriff’s Office, Standard Operating Procedures

#### 2. Emotional Support Services [DOJ § 115.53]

b. The Washington County Jail shall inform inmates, prior to giving them access to outside advocates, 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.

A review of the WCSO inmate handbook shows the inmates are informed they can dial 224 or 4905 from the facility phone to make a confidential and anonymous report of any violations. Not just violations that involve sexual abuse or sexual harassment.

#### 115.53(c)

c. The Washington County Sheriff's Office shall 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. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding inmate access to outside confidential support services and legal representation. No corrective action is required.

## Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office Policy
- Copy Of MOU
- Publicly displayed sexual harassment policy on the Washington County Sheriff's Office web site
- Washington County Sheriff's Office we site [www.washcountysheriff.com](http://www.washcountysheriff.com)

115.54(a)



WCSCO provided an MOU established with the Yuma County Sheriff's Office showing Yuma County agrees to accept third party reports of sexual abuse against inmates at the Washington County Justice Center. Yuma County will refer any and all information received to the Sheriff, or Undersheriff of Washington County Justice Center for proper investigation.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding third-party reporting. No corrective action is required.

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.61 (a)

- 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  No
- 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  No
- 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 abuse or sexual harassment or retaliation?  Yes  No

#### 115.61 (b)

- 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  No

#### 115.61 (c)

- 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  No
- 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  No

#### 115.61 (d)

- 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  No

#### 115.61 (e)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office Policy
- Medical Policy
- WCSO Memo

#### 115.61(a)

Washington County Sheriff's Office, Standard Operating Procedures

#### 2. Staff Reporting Rules [DOJ §115.51(d) and §115.61]

Staff reporting responsibilities [DOJ §115.61] are as follows:

- a. Any staff member who has knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against inmates or staff who reported such an incident; and any staff neglect that may have contributed to such incident or retaliation, shall immediately report such incident or retaliation.

Interviews with staff demonstrate their knowledge and understanding of their reporting responsibilities according to the facility policy and PREA regulations. The facility maintains an electronic system that maintains the reports. The facility administrators will ensure that information is only accessed by those with a need to know and who have been given appropriate authorization and access.

#### 115.61(b)

b. Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone.

Note: Medical and mental health practitioners must report knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or staff neglect pursuant to this section. This information will be provided to inmates, in writing, at the initiation of services.

Interviews:

- Undersheriff
- PREA Coordinator
- Medical and mental health staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding staff and agency reporting duties. No corrective action is required.

## Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.62 (a)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office Policy
- WCSO Memo
- E-force log

115.62(a)

Washington County Sheriff's Office, Standard Operating Procedures  
G. Protection of Inmates Facing Substantial Risk

1. Upon Learning of Substantial Risk [DOJ §115.62]

When Washington County Sheriff's Office learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.

The PAQ shows there were 19 instances the agency or facility has determined that an inmate was subject to substantial risk of imminent sexual abuse. In those instances that the facility made such a determination, half an hour passed before taking action to move the inmate. The longest amount of time that elapsed before taking action was one hour.

There are several protective measures the facility can take when there is a substantial risk of imminent sexual abuse for an inmate. An inmate can be placed in protective custody, single or double cell assignment, involuntary segregation and the inmate will be provided mental health services which is offered 24 hours.

Interviews:

- Sheriff
- Undersheriff
- Random staff

Interviews confirm the different housing options available for inmates if there is a risk of victimization. Based on the interviews there were zero inmates in protective custody at the time of the onsite audit phase as a result of substantial risk of imminent sexual abuse.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding agency protection duties. No corrective action is required.

## Standard 115.63: Reporting to other confinement facilities

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.63 (a)

- 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  No

#### 115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  Yes  No

#### 115.63 (c)

- Does the agency document that it has provided such notification?  Yes  No

#### 115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- Washington County Protocol SOP
- WCSO Memo

#### 115.63(a)

Washington County Sheriff's Office, Standard Operating Procedures

#### I. Notifying Other Confinement Agencies [DOJ § 115.63]

A. Upon Washington County Sheriff's Office receiving an allegation that an inmate was sexually abused while confined at another facility, the head of Washington County Sheriff's Jail will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.

B. Such notification will be provided as soon as possible, but no later than 72 hours after receiving the allegation.

C. Washington County Sheriff's Office will document that it has provided such notification.

When the head of Washington County receives a notice that an inmate was sexually abused while confined at another facility, the head of the WCSO where the alleged abuse occurred will be contacted to make notification. This will happen within 72 hours of receiving the notification and it will be documented.

WCSO will notify an investigator, which will generate a report and conduct an interview with the inmate. The inmate will then be referred to medical staff to assess the inmates medical and menta health services.

WCSO received one allegation that an inmate has been abused while being held in another facility. A report for the allegation was generated and the investigation was initiated.

Interviews:

- Sheriff
- Undersheriff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding reporting to other confinement facilities. No corrective action is required.

## Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.64 (a)

- 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  No
- 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  No
- 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  No
- 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  No

### 115.64 (b)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office SOP
- Documentation of responses to allegations
- WCSO Memo
- WCSO report on possible incident
- Washington County Sheriff's Office Policy

When there is a sexual assault allegation the staff are required to follow a timeline.

### FACILITY SEXUAL ASSAULT RESPONSE PROCESS TIMELINE

#### A. IMMEDIATELY FOLLOWING AN ALLEGATION OF A SEXUAL ASSAULT

##### Jail Deputy First Responder:

1. Notify Jail Administrator.
2. Secure the crime scene and preserve evidence, including on the survivor's and perpetrator's bodies.
3. Separate the survivor and alleged perpetrator(s).
4. Offer the survivor the option to speak with a confidential rape crisis advocate confidentially by phone.
5. If requested by the survivor, contact the advocate to set-up the confidential call in a private location.
6. Request that the alleged survivor and perpetrator refrain from actions that could destroy physical evidence, such as bathing, brushing teeth, changing their clothes, urinating, defecating, smoking, drinking or eating until they have been examined by qualified medical personnel.
7. Escort the alleged inmate perpetrator(s) to an isolation cell and turn off the water until the arrival of law enforcement.
8. Complete an incident report.

##### Interviews:

- Random staff

Interviews with all staff demonstrate they will separate the victim from the perpetrator to ensure their safety and secure the scene for the possible collection of evidence. The staff will also draft a report to include the details of the allegation.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding staff first responder duties. No corrective action is required.

## Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Sexual Assault Response Protocol

Washington County Sheriff's Office, Standard Operating Procedures

C. Immediate Steps after Receiving Report of Incident [DOJ §115.64 and §115.82 (b)]

1. When a first responder learns that an inmate has been sexually abused, they shall take immediate action to protect the inmate. This includes:

a. Separate the inmate from the alleged perpetrator;

b. Preserve and protect any crime scene until appropriate steps can be taken to collect evidence; and



c. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim - - and ensure that the alleged abuser - - not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and

d. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, the Jail Deputy shall immediately notify the appropriate medical and mental health practitioners. [115.82 (b)]

2. When the first staff responder is *not* a security staff member, they will request that the alleged victim not take any actions that could destroy physical evidence, and then notify a Jail Deputy.

Note: DOJ defines “first responder” as: the staff person (or persons) who first arrive at the scene of an incident.

Interviews:

- Undersheriff
- PREA Coordinator
- PREA Compliance Manager
- Random staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding a coordinated response to an incident of sexual abuse. No corrective action is required.

## Standard 115.66: Preservation of ability to protect inmates from contact with abusers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency’s behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

#### 115.66 (b)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ

#### IX. Collective Bargaining Agreements [DOJ § 115.66]

A. The Washington County Sheriff's Office or any governmental entity responsible for collective bargaining on the Washington County Sheriff's Office behalf will not enter into or renew any collective bargaining agreement or other agreement that limits the Washington County Sheriff's Office 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.

B. Nothing in this section will restrict Washington County Sheriff's Office entering into or renewal of agreements that govern:

1. The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions in this policy relating to the standard of evidence for substantiating allegations of sexual abuse/harassment and disciplinary sanctions for staff, or
2. Whether a no-contact assignment that is imposed pending the outcome of an investigation will be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.

#### Interviews:

- Undersheriff
- PREA Coordinator

#### Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding the preservation of ability to protect inmates from contact with abusers. No corrective action is required.

## Standard 115.67: Agency protection against retaliation

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.67 (a)

- 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  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

### 115.67 (b)

- 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  No

### 115.67 (c)

- 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  No
- 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  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  Yes  No
- 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  No
- 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  No
- 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  No
- 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  No

- 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  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?  Yes  No

#### 115.67 (e)

- 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  No

#### 115.67 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office: Standard Operation Procedure
- WCSO memo

#### 115.67(a)

Washington County Sheriff's Office, Standard Operating Procedures  
G. Protection from Retaliation [DOJ §115.67]

1. The Washington County Sheriff's Office policy is 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.

2. The Washington County Sheriff's Office will 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.

WCOSO designate the facility shift supervisors or Lieutenant of each shift to monitor for any possible signs of retaliation.

115.67(c)

Washington County Sheriff's Office, Standard Operating Procedures

G. Protection from Retaliation [DOJ §115.67]

3. For at least 90 days following a report of sexual abuse, Washington County Sheriff's Office will monitor the conduct and treatment of inmates or staff who reported sexual abuse, and 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, and shall act promptly to remedy any such retaliation.

Washington County Sheriff's Office will continue such monitoring beyond 90 days if the initial monitoring indicates an ongoing need. Monitoring will include:

- a. Periodic in-person conversations with inmates and/or staff;
- b. Review of disciplinary incidents involving inmates;
- c. Review of housing or program changes; and
- d. Review of negative performance reviews or reassignments of staff.

115.67(a)

Washington County Sheriff's Office, Standard Operating Procedures

G. Protection from Retaliation [DOJ §115.67]

It is the policy of the Washington County Sheriff's Office to protect from retaliation all inmates and staff members who:

- Report sexual abuse or harassment; or
- Cooperate with sexual abuse or harassment investigations

The shift supervisor and Lieutenant will monitor for retaliation with periodic checks. The checks will be logged within the individual's log.

Interviews:

- Sheriff
- Undersheriff
- Designated staff members charged with monitoring retaliation

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding agency protection against retaliation. No corrective action is required.

## Standard 115.68: Post-allegation protective custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.68 (a)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Facility SOP
- WCSO Memo95,250

#### Washington County Sheriff's Office, Standard Operating Procedures

4. Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the same requirements that are discussed above [DOJ § 115.68: Post-allegation protective custody].

It is the policy of the Washington County Sheriff's Office to protect from retaliation all inmates and staff members who:

- Report sexual abuse or harassment; or
- Cooperate with sexual abuse or harassment investigations

The Washington County Sheriff's Office requires staff members to monitor any type of behavior that appears to be retaliation of any kind. When retaliation is detected the information will be documented on an incident report form and forwarded to the Jail Supervisor and Jail Administrator.

For *at least 90 days* following a report of sexual abuse, the Washington County Sheriff's Office will *monitor the conduct and treatment* of:

- Inmates or staff who **reported** sexual abuse; and
- Inmates who **were reported to have suffered** sexual abuse

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding post-allegation protective custody. No corrective action is required.

## INVESTIGATIONS

### Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- 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  No  NA

#### 115.71 (b)

- 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  No

#### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  
 Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

#### 115.71 (d)

- 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  No

#### 115.71 (e)

- 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  No
- 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  No

#### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No
- 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  No

#### 115.71 (g)

- 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  No

#### 115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  Yes  No

#### 115.71 (i)

- 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  No

#### 115.71 (j)

- 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  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)



- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Facility SOP
- Investigative Report
- Record retention schedule
- WCSO Memo

115.371(a)

Washington County Sheriff's Office, Standard Operating Procedures

F. Investigation of Incidents [DOJ §§ 115.21(a)(b)(c)(f) and(h), 115.22, 115.71, 115.72, 115.73 and 115.86]

1. Washington County Sheriff's Office shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. [§ 115.22]

2. It is the Washington County Sheriff's Office policy 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. Washington County Sheriff's Office shall publish this policy on its website at [www.washcountysheriff.com] and make the policy available through other means. Washington County Sheriff's Office shall document all such referrals. If a separate entity is responsible for conducting criminal investigations, such publication will describe the responsibilities of both Washington County Sheriff's Office and the investigating entity. [DOJ § 115.22]

3. When Washington County Sheriff's Office conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. [DOJ § 115.71]

4. Where sexual abuse is alleged, Washington County Sheriff's Office shall use investigators who have received special training in sexual abuse investigations pursuant to Policy and procedure. [DOJ § 115.71]

5. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. [DOJ § 115.71]

6. When the quality of evidence appears to support criminal prosecution, Washington County Sheriff's Office shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. [DOJ § 115.71]

7. The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person's status as inmate or staff. Washington County Sheriff's Office shall not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation. [DOJ § 115.71]

8. Administrative investigations:

a. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and

b. Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. [DOJ § 115.71]

9. Criminal investigations:

a. Shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible; and

b. Shall be referred for prosecution if there are substantiated allegations of conduct that appear to be criminal. [DOJ § 115.71]

c. The Washington County Sheriff's Office shall retain all written reports required by this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. [DOJ § 115.71]

d. The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation. [DOJ § 115.71]

e. When outside agencies investigate sexual abuse, Washington County Sheriff's Office shall cooperate with outside investigators and will endeavor to remain informed about the progress of the investigation. [DOJ § 115.71]

115.71(e)

Inmate incident reports that occurred in the jail, containing the inmates name, date and time of the incident, names of other inmates involved, and narrative description of the incident are retained for 10 years after the inmate is released.

Interviews:

- Undersheriff

- PREA Coordinator
- PREA Compliance Manager
- Investigative staff
- Staff who supervise inmates in segregated housing

Interviews and a review of sexual assault and sexual harassment reports show there were zero substantiated allegations of conduct that appeared to be criminal that were referred for prosecution in the past 12 months.

An interview with one inmate who made a report alleging sexual harassment stated, the investigation was completed by an investigator from the Morgan County Sheriff's Office.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding criminal and administrative agency investigations. No corrective action is required.

## Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.72 (a)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Administrative Investigation
- Washington County Sheriff's Office SOP

For administrative investigation, Washington County Sheriff's Office shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

If the alleged sexual abuse involves a staff member of the Washington County Sheriff's Office, volunteer, or contractor, Morgan County Sheriff's Office will conduct the criminal investigation.

Interviews:

- PREA Coordinator
- Investigative staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding evidentiary standard for administrative investigations. No corrective action is required.

## Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.73 (a)

- 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  No

### 115.73 (b)

- 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  No  NA

### 115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (d)

- 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  No
- 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 convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (e)

- Does the agency document all such notifications or attempted notifications?  Yes  No

#### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP

- WCSO memo
- Allegation report
- Lexipol policy # 606
- Email communication

#### 115.73(a)

Washington County Sheriff's Office, Standard Operating Procedures

11. Following an investigation into an inmate's allegation that he or she suffered sexual abuse at the Washington County Justice Center, Washington County Sheriff's Office shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. [DOJ § 115.73]

There were four administrative investigations alleging inmate sexual abuse that was completed by a trained WCSO investigator within the past 12 months. Of those investigations all four inmates were notified of the results of the investigation verbally or in writing.

#### 115.73(b)

12. If Washington County Sheriff's Office did not conduct the investigation; it shall request the relevant information from the investigative agency in order to inform the inmate. [DOJ § 115.73]

Morgan County Sheriff's Office completed a staff on inmate sexual harassment allegation. There were zero sexual abuse allegations requiring an outside entity other than Morgan County to investigate.

#### 115.73(c)

13. Following an inmate's allegation that a staff member has committed sexual abuse against an inmate, Washington County Sheriff's Office shall subsequently inform the inmate (unless it has determined that the allegation is unfounded) whenever:

- a. The staff member is no longer posted within the inmate's unit;
- b. The staff member is no longer employed at the facility;
- c. The Washington County Sheriff's Office learns that the staff member has been charged with a crime related to sexual abuse within the facility; or
- d. The Washington County Sheriff's Office learns that the staff member has been convicted on a charge related to sexual abuse within the facility. [DOJ § 115.73]

#### 115.73(d)

14. Following an inmate's allegation that he or she has been sexually abused by another inmate, Washington County Sheriff's Office will subsequently inform the alleged victim whenever:

- a. The Washington County Sheriff's Office learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
- b. The Washington County Sheriff's Office learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

All such notifications or attempted notifications will be documented.

Interviews:

- Undersheriff
- Investigative staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding reporting to inmates. No corrective action is required.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  Yes  No

#### 115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  Yes  No

#### 115.76 (c)

- 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  No

#### 115.76 (d)

- 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  No
- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office policy
- Washington County SOP Protocol
- WCSO Memo

115.76(a)

Washington County Sheriff's Office, Standard Operating Procedures

H. Sanctions for Individuals Found to have participated in Sexual Abuse or Harassment

1. Disciplinary Sanctions for Staff [DOJ Standards §115.76]

a. Staff will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

b. Termination will be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

115.76(c)

c. Disciplinary sanctions for violations of Washington County Sheriff's Office policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

115.76(d)

d. 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, will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

In the past 12 months there was one staff member from the facility who violated the sexual harassment policy, and zero staff who violated the sexual abuse policy. The staff member who violated the sexual harassment policy was addressed short of discipline and termination was not a consideration as the violation did not rise to that level.

A review of the administrative investigation into the sexual harassment allegation shows there was a thorough investigation and the report appeared to detail victim, perpetrator and witness statements to assist in making a finding.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding disciplinary sanctions for staff. No corrective action is required.



## Standard 115.77: Corrective action for contractors and volunteers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  Yes  No

#### 115.77 (b)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office SOP
- WCSO Memo

#### 115.77(a)

Washington County Sheriff's Office, Standard Operating Procedures

#### 2. Corrective Action for Contractors and Volunteers [§115.77]

a. Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

b. The Washington County Sheriff's Office will take appropriate remedial measures and will consider whether to prohibit further contact with inmates or banning from operating in the Jail in the case of any violation of Washington County Sheriff's Office sexual abuse or sexual harassment policies by a contractor or volunteer.

There were zero contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

Interviews:

- Undersheriff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding corrective action for contractors and volunteers. No corrective action is required.

## Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.78 (a)

- 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  No

### 115.78 (b)

- 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  No

### 115.78 (c)

- 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  No

### 115.78 (d)

- 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  No

### 115.78 (e)

- 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  No

#### 115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?  Yes  No

#### 115.78 (g)

- 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  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Sheriff's Office SOP
- WCSO Memo
- Centennial Mental Health MOU
- PREA booking acknowledgment

#### 115.78(a)

Washington County Sheriff's Office, Standard Operating Procedures

#### 3. Disciplinary Sanctions for Inmates [DOJ Standards §115.78]

a. Inmates will be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

There were zero administrative or criminal inmate-on-inmate sexual abuse allegations in the past 12 months.

b. Sanctions will be 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.

115.78(d)

c. The disciplinary process will consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

d. If the Washington County Sheriff's Office is able to offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the Jail will consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

115.78(e)

e. The Washington County Sheriff's Office may discipline or charge criminally if appropriate, an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

115.78(f)

f. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Interviews:

- Undersheriff
- Random staff
- Random inmates

Interviews confirm the WCSO prohibits sexual activity between inmates and staff.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding interventions and disciplinary sanctions for inmates. No corrective action is required.

## MEDICAL AND MENTAL CARE

### Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.81 (a)

- 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.)  
 Yes    No    NA

#### 115.81 (b)

- 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.)  Yes    No    NA

#### 115.81 (c)

- 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?  Yes    No

#### 115.81 (d)

- 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    No

#### 115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?  Yes    No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- SHP 14 assessment form
- WCSO Memo
- SHP mental health assessment sheet
- SHP policies and procedures pack
- SHP mental health evaluation form
- SHP release of offender mental health or substance abuse treatment information
- Washington County Detention Center vulnerably/Victimization sexually behavior assessment

115.81(a)

Washington County Sheriff's Office, Standard Operating Procedures

3. Medical and Mental Health Screenings [DOJ Standards § 115.81]

a. If the screening required in Section F.1 above indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

According to the PAQ, all inmates who have disclosed any prior sexual victimization during the intake screening are offered a follow-up meeting with a medical or mental health practitioner. There were zero inmates interviewed who reported prior victimization during intake. The interviews confirmed all inmates are screened by medical staff during the intake process, which includes assess for prior victimization.

The intake staff responsible for completing the risk screening interviewing confirmed that an inmate that has experienced prior sexual victimization, whether in an institution or in the community are offered a follow-up meeting with a medical or mental health practitioner.

The Southern Health Partners policy requires all inmates entering the facility to be screened for classification. When an inmate reports having been a victim of sexual assault/abuse and expresses a willingness to participate in treatment, staff shall refer the inmate to medical and mental health services. The health services staff will assess the inmates need for treatment and discuss available treatment options when appropriate. Preventing sexual abuse/assault also suggests that staff should attempt to identify sexually assaultive inmates.

The PAQ also indicates 1.9 percent of the inmates admitted to the facility in the past 12 months disclosed prior sexual victimization.

115.81(b)

b. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.

In the past 12 months the number of inmates that have indicated during screening a prior history of sexual abuse as a perpetrator who were offered a follow-up meeting with a mental health practitioner is 19 percent.

115.8(e)

c. Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

Interviews:

- Medical and mental health staff
- Investigative staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding medical and mental health screenings; history of sexual abuse. No corrective action is required.

## Standard 115.82: Access to emergency medical and mental health services

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.82 (a)

- 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  No

#### 115.82 (b)

- 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  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

#### 115.82 (c)

- 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  No

#### 115.82 (d)

- 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  No

### Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- SHP Policy and Procedures
- WCSO memo

#### 115.82(a)

Washington County Sheriff's Office, Standard Operating Procedures  
D. Medical and Mental Health Services

#### 1. Emergency [DOJ §115.82]

a. Inmate victims of sexual abuse shall 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.

When there is an allegation of sexual abuse an inmate is referred to a mental health practitioner for assessment and appropriate crisis intervention. Based on the results of the assessment, the mental health practitioner will develop a plan for on-going services.

#### 115.82(c)

b. Inmate victims of sexual abuse while incarcerated shall be 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.

#### 115.82(d)

c. Treatment services shall be 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.

#### Interviews:

- Random staff
- Medical and mental health staff

#### Conclusion:



Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding access to emergency medical and mental health services. No corrective action is required.

## Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.83 (a)

- 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  No

#### 115.83 (b)

- 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  No

#### 115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care?  Yes  No

#### 115.83 (d)

- 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  No  NA

#### 115.83 (e)

- 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  No  NA

#### 115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?  Yes  No

### 115.83 (g)

- 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  No

### 115.83 (h)

- 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.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- SHP policy and procedure manual
- WCSO Memo

#### 115.83(a)

Washington County Sheriff's Office, Standard Operating Procedures

#### 2. Ongoing Medical and Mental Health Care [DOJ §115.83]

a. The Washington County Sheriff's Medical Unit shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in jail.

WCSO offers medical and mental health evaluations, and as appropriate, treatment to all inmates who have been victimized by sexual abuse in any institution. The auditor observed the medical clinic and the exam room where the SANE exam would be conducted. If additional services are necessary, the inmate would be transported to a local hospital.

#### 115.83(b)

b. The evaluation and treatment of such victims shall 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.

Medical staff confirmed victims are given timely information and access to all lawful pregnancy-related services if pregnancy results from sexual abuse while incarcerated.

c. The Washington County Jail shall provide such victims with medical and mental health services consistent with the community level of care.

115.83(d)

d. Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

115.83(e)

e. If pregnancy results from the conduct described in this section, victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services (such as prenatal care and access to pregnancy termination services, where available).

115.83(f)

f. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

115.83(g)

g. Treatment services shall be 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.

The WCSO clinic is equipped to provide a SANE exam to assess general health and to treat any physical injuries. The medical practitioner interviewed during the onsite audit confirmed sexual abuse victims would be offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.

Interviews:

- Medical and mental health staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding ongoing medical and mental health care for sexual abuse victims and abusers. No corrective action is required.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.86 (a)

- 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  No

#### 115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?  Yes  No

#### 115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  Yes  No

#### 115.86 (d)

- 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  No
- 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  No
- 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  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- 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  No

#### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- WCSO Memo

115.86(a)

Washington County Sheriff's Office, Standard Operating Procedures

15. Sexual abuse incident reviews [DOJ § 115.86]

a. The Washington County Sheriff's Office will 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.

In the past 12 months there was one substantiated staff sexual harassment allegation that required an incident review.

b. The review will ordinarily occur within 30 days of the conclusion of the investigation.

c. The review team will include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The one allegation was made on August 30, 2018 and the incident review was completed on September 21, 2018, which was within the 30-day required timeframe.

d. The review team will:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4. Assess the adequacy of staffing levels in that area during different shifts;
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and

6. Prepare a report of its findings, including determinations made pursuant to this section, and any recommendations for improvement and submit the report to the Sheriff and Jail Administrator/PREA coordinator.

e. The Washington County Sheriff's Office will implement the review team's recommendations for improvement or document its reasons for not doing so.

According to the PAQ and sign-in sheet for the incident review conducted on September 21, 2018, the review team included upper-level management officials and allowed for input from the Undersheriff, PREA Coordinator, PREA Compliance Manager and Medical Practitioner.

Interviews:

- Undersheriff
- PREA Coordinator
- PREA Compliance Manager
- Medical staff

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding sexual abuse incident reviews. No corrective action is required.

## Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.87 (a)

- 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  No

### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?  Yes  No

### 115.87 (c)

- 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  No

### 115.87 (d)

- 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  No

### 115.87 (e)

- 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.)  Yes  No  NA

### 115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- Set of definitions from the Washington County Detention Center policy
- SSV for the Department of Justice
- WCSO Memo

#### 115.87(a)

Washington County Sheriff's Office, Standard Operating Procedures

##### A. Data Collection [DOJ § 115.87]

1. The Washington County Sheriff's Office will collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.
2. The Washington County Sheriff's Office will aggregate the incident-based sexual abuse data at least annually.
3. The incident-based data collected will 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.

4. The Washington County Sheriff's Office will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

5. The Washington County Sheriff's Office also will obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

6. Upon request, the Washington County Sheriff's Office will provide all such data from the previous calendar year to the Department of Justice no later than June 30.

According to the PAQ and a review of the annual reports on the WCSO website, the agency collects data as needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding data collection. No corrective action is required.

## Standard 115.88: Data review for corrective action

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.88 (a)

- 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  No
- 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  No
- 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: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?  Yes  No

#### 115.88 (b)

- 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  No

#### 115.88 (c)

- 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  No



## 115.88 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP
- WCSO Memo
- Washington County Sheriff's Office Policy
- WCSO website at: <http://washcountyjustice.com/prea/>

#### 115.88(a)

Washington County Sheriff's Office, Standard Operating Procedures

B. Data Review for Corrective Action [DOJ § 115.88]

1. The Washington County Sheriff's Office will 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:
  - a. Identifying problem areas;
  - b. Taking corrective action on an ongoing basis; and
  - c. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.
2. Such report will include a comparison of the current year's data and corrective actions with those from prior years and will provide an assessment of the Washington County Sheriff's Office progress in addressing sexual abuse.

3. The Washington County Sheriff's Office report will be approved by the Washington County Sheriff or Undersheriff and made readily available to the public through its website or, if it does not have one, through other means.

4. The Washington County Sheriff's Office may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.

Interviews:

- Sheriff
- PREA Coordinator
- PREA Compliance Manager

Annual reports are published on the WCSO website at: <http://washcountyjustice.com/prea/>. Reports are published from 2018 through present. The reports are inclusive of annual data comparison and statistical analysis, corrective actions and policy updates. All personal identifying information is redacted from the report prior to posting on the website.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding data review for corrective action. No corrective action is required.

## Standard 115.89: Data storage, publication, and destruction

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

#### 115.89 (b)

- 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  No

#### 115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  Yes  No

#### 115.89 (d)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Documents reviewed:

- WCSO PAQ
- Washington County Detention Center SOP

115.389(a)

Washington County Sheriff's Office, Standard Operating Procedures

### **C. Data Storage, Publication, and Destruction [DOJ § 115.89]**

1. The Washington County Sheriff's Office will ensure that data collected pursuant to § 115.87 are securely retained.

According to the PAQ, the agency ensures that incident-based and aggregate data are securely retained. This was corroborated by interviewing the PREA Coordinator. She stated the data is securely maintained and only a few employees have access. Furthermore, the auditor received all pre-on-site phase documents in a zip file through a secure email.

2. The Washington County Sheriff's Office will make all aggregated sexual abuse data, from the Washington County Jail or an agency it contracts with to house inmates, readily available to the public at least annually through its website or, if it does not have one, through other means.

Reports are published from 2015 to 2018 on the agency website.

3. Before making aggregated sexual abuse data publicly available, the Washington County Sheriff's Office will remove all personal identifiers.

The auditor reviewed the published annual reports and observed personal identifiers were not included in the reports.

4. The Washington County Sheriff's Office will 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.

Interviews:

- PREA Coordinator

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding data storage, publication, and destruction. No corrective action is required.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.401 (a)

- 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  No

#### 115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*)  Yes  No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.)  Yes  No  NA
- 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  No  NA

#### 115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?  Yes  No

#### 115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Yes  No

### 115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  
 Yes  No

### 115.401 (n)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

The Washington County Sheriff's Office were found fully compliant during the first audit cycle and are now contracted with this Auditor to conduct the PREA audit during the second cycle. WCSO does not have other facilities under its control or authority.

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding frequency and scope of audits. No corrective action is required.

## Standard 115.403: Audit contents and findings

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.403 (f)

- 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 that there has never been a Final Audit Report issued.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

The Auditor report from 2016 for the Washington County Sheriff's Office can be found on the following website: <http://washcountyjustice.com/prea/>

Conclusion:

Based upon the review and analysis of the available evidence, the auditor has determined the facility is fully compliant with this standard regarding audit contents and findings. No corrective action is required.

## AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

### Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.<sup>1</sup> Auditors are not permitted to submit audit reports that have been scanned.<sup>2</sup> See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

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**Auditor Signature**

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**Date**

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<sup>1</sup> See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

<sup>2</sup> See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.