

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

Interim Final

Date of Interim Audit Report: Click or tap here to enter text. N/A

If no Interim Audit Report, select N/A

Date of Final Audit Report: July 24, 2021

Auditor Information

Name: Mark E Stegemoller	Email: markronda@centurylink.net
Company Name: Mark Stegemoller PREA Consultant LLC	
Mailing Address: 3873 Utica Road	City, State, Zip: Lebanon, Ohio 45036
Telephone: 513-805-5176	Date of Facility Visit: June 14-15, 2021

Agency Information

Name of Agency: Corrections Center of Northwest Ohio			
Governing Authority or Parent Agency (If Applicable): Corrections Commission of Northwest Ohio (Regional Jail Board)			
Physical Address: 03151 County Road 24.25		City, State, Zip: Stryker, Ohio 43557	
Mailing Address: <small>Click or tap here to enter text.</small>		City, State, Zip: <small>Click or tap here to enter text.</small>	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency Website with PREA Information: : www.ccnoregionaljail.org			

Agency Chief Executive Officer

Name: Dennis Sullivan, Executive Director	
Email: dennis.sullivan@noris.org	Telephone: 419-428-3800 ext. 200

Agency-Wide PREA Coordinator

Name: Juli Steingass	
Email: juli.steingass@noris.org	Telephone: 419-428-3800 ext. 402
PREA Coordinator Reports to: Executive Director	Number of Compliance Managers who report to the PREA Coordinator: 0

Facility Information

Name of Facility: Corrections Center of Northwest Ohio (CCNO)

Physical Address: 03151 County Road 24.25

City, State, Zip: Stryker, Ohio 43557

Mailing Address (if different from above):

Click or tap here to enter text.

City, State, Zip: Click or tap here to enter text.

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: www.ccnoregionaljail.org

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: Jail Standards for Ohio)

N/A

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

Click or tap here to enter text.

Warden/Jail Administrator/Sheriff/Director

Name: Dennis Sullivan, Executive Director

Email: dennis.sullivan@noris.org

Telephone: 419-428-3800 ext. 200

Facility PREA Compliance Manager

Name: Juli Steingass

Email: juli.steingass@noris.org

Telephone: 419-428-3800 ext. 402

Facility Health Service Administrator N/A

Name: Sharon Myers

Email: sharon.myers@shpjails.com

Telephone: 419-428-3800 ext. 525

Facility Characteristics

Designated Facility Capacity:

668

Current Population of Facility:

535

Average daily population for the past 12 months:	557	
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:	19-80	
Average length of stay or time under supervision:	25.6 days	
Facility security levels/inmate custody levels:	Minimum, Medium, and Maximum	
Number of inmates admitted to facility during the past 12 months:	3964	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:	2694	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:	1089	
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	
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):	<input type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input 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 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: Click or tap here to enter text. <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	161	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	44	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	15	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	243	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	1	

Physical Plant

Number of buildings: 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.	2
Number of inmate housing units: 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.	20
Number of single cell housing units:	8
Number of multiple occupancy cell housing units:	1
Number of open bay/dorm housing units:	11
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	18
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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

<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<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: Click or tap here to enter text.)
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Investigations

Criminal Investigations

<p>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:</p>	<p>2</p>
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<p>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.</p>	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p>	<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: Click or tap here to enter text.) <input type="checkbox"/> N/A
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Administrative Investigations

<p>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?</p>	<p>2</p>
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<p>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</p>	<input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p>	<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: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A
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Audit Findings

Audit Narrative (including Audit Methodology)

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.

The Prison Rape Elimination Act (PREA) onsite audit of the Corrections Center of Northwest Ohio located on 03151 County Road 24.25, Stryker, Ohio, was conducted on June 14-15, 2021, by Mark Stegemoller, a U.S. Department of Justice Certified PREA Auditor and was assisted by, David Kollar. Audit notices were emailed to the facility, April 21, 2021, and posted on May 3, 2021, throughout the facility six weeks before the onsite review and date stamped. Photographic evidence was submitted, demonstrating the timely posting of the notices. The auditor received correspondence from two different inmates wishing to speak to the auditor. While onsite the Auditor interviewed both inmates and presented their concerns to the facility PREA Compliance Manager for follow-up action. The PREA Compliance Manager provided the Pre-Audit Questionnaire (PAQ) to the auditor and supporting documents on a flash drive several weeks before the onsite review portion of the audit. The auditor conducted a thorough review of all submitted documentation and materials along with the information included in the completed PAQ. The documentation reviewed included agency policies, protocols, facility-related documents and forms, education materials, training curriculum, organizational charts, posters, pamphlets, and other PREA related materials provided to demonstrate compliance with the PREA standards.

This was the second PREA audit for the Corrections Center of Northwest Ohio. The entrance briefing for the audit was held on June 14, 2021, with Executive Director Dennis Sullivan, Director of Operations, Director of Security, and Accreditation Supervisor. After introductions and welcoming remarks by the Executive Director, and the auditor, the discussion turned to the audit schedule and an overview of the PREA audit process. The auditor described the onsite phase of the audit and explained the triangulation methodology the auditor would utilize to obtain evidence of compliance. The auditor would observe the Jails day-to-day practices, review written policies and procedures, complete a facility site inspection. Conduct staff and inmate interviews; and review additional documentation to confirm implementation. The auditor explained that the PREA audit process is much more invasive than most correctional audits. The auditor will work collaboratively with staff to ensure the jail achieves full compliance with PREA Standards. The auditor advised staff that the Department of Justice (DOJ) expects that corrective action will be necessary in most cases. This is a normal part of the audit and should not be considered adversely. The auditor further specified that the document review and information gathering would conceivably be more extensive than experienced during the jails first PREA audit due to additional guidance published by the (DOJ).

After the entrance briefing, the auditor conducted a facility sight inspection of the entire jail accompanied by executive staff. Areas inspected included the facility administrative office areas, video court, jail control center, inmate housing units, recreation, intake, inmate dining area, commissary, maintenance, warehouse, inmate property, mental health, dental and the medical department. At each site visited throughout the inspection, the auditor was given a comprehensive description of the area's responsibility by personnel in charge of the area. The auditor spoke informally with staff and inmates during the inspection and gave specific attention to security camera placements, video monitoring capabilities, site lines, and potential blind spots. The auditor observed, among other things, the jail's configuration, location and number of security cameras and mirrors, staff direct supervision of inmates throughout the jail, housing unit layouts, including showering and toileting areas. The auditor was

mindful to pay specific attention to the placement of PREA related directives, posters, and PREA informational resources. Individual shower stalls allow inmates to shower separately, allowing for adequate security and privacy. Toilet stalls are also separated by partitions to allow for privacy. The auditor did not notice any concerns for potential of cross-gender viewing. Notices of the PREA audit were posted throughout the jail, to include in all inmate living areas.

After the Jail inspection was completed, formal interviews began with random inmates. Inmate interviews were conducted in one of the Jails inmate programming rooms. On the first day of the site visit, the Jail housed 454 male inmates and 81 female inmates. There was a total of thirty-nine (39) inmates interviewed over the two days (June 14-15, 2021). Of the thirty-nine (39) inmates interviewed, twenty-five (25) were randomly selected and fourteen (14) were identified for target interviews. Of the random inmates interviewed, seventeen (17) were male and eight (8) were female. Of the targeted inmates interviewed, nine (9) were male and five (5) were female. The targeted group consisted of four (4) acknowledging prior victimization, three (3) who reported sexual abuse, two (2) from the LGBTI community, one (1) with a physical disability, one (1) with a cognitive disability, one (1) that was deaf and two (2) who were limited English proficient (LEP). Inmates were interviewed using the recommended Department of Justice (DOJ) protocols that question their knowledge of PREA protection and their knowledge on reporting mechanisms that are in place to report sexual abuse or sexual harassment.

On day one of the onsite inspection formal interviews began with random and specialized staff (from all three shifts) along with Jail executive staff and agency administrators. The Auditor and his assistant were provided with private offices in the operations area of the Jail to conduct confidential staff interviews. A total of thirty-four (34) Jail staff were interviewed over the two days (June 14-15, 2021). Included in the interviews were thirteen (13) random front-line staff representing all three shifts. Specialty staff including medical/mental health, first responders, investigator, intake/risk screening, human resources, SAFE/SANE, incident review team member, intermediate or higher-level staff, victim assistance, staff charged with monitoring retaliation, and training officer. Also interviewed was the Executive Director, Jail PREA Compliance Manager and two (2) contractors. All staff were interviewed using the DOJ prescribed protocols.

While onsite, the auditor reviewed randomly selected personnel files for five (5) staff members to determine compliance with PREA training mandates and background check procedures. The auditor reviewed five (5) randomly selected inmate files to assess proper screening and intake procedures for the risk of sexual victimization and/or abusiveness, inmate PREA information received upon intake, and comprehensive PREA education. The auditor reviewed (5) randomly selected investigation files to determine compliance with PREA investigation mandates. While onsite, the auditor spoke via telephone with Williams County Victim Assistance. Along with the MOU, the interview confirmed the agreement in place with the CCNO to provide rape crisis intervention services to victims of sexual abuse that occurs at the jail. The facility utilizes Bryan Hospital for forensic exams. The auditor verified SANE/SAFE services are provided through Bryan Hospital. The auditor conducted a phone call interview with a representative from the Bryan Hospital who explained the SANE/SAFE services that would be provided if ever needed.

Jail personnel provided the auditor unimpeded access to all parts of the facility during the onsite inspection. The auditor conducted an exit briefing with the Executive Director, Director of Security and Jail PREA Compliance Manager in the evening, Tuesday, June 15, 2021. The auditor explained he could not give an outcome of the audit but did provide insight into some preliminary findings and discussed the post-site visit audit activity the auditor will need to accomplish to verify compliance with all the PREA standards. The auditor thanked the staff and commended them on their hard work and commitment to the Prison Rape Elimination Act. During the report writing period the auditor communicated on numerous occasions with the PREA Compliance Manager via phone calls and email

correspondence, requesting additional documentation, clarification on policies, procedures, and agency practices.

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 Corrections Center of Northwest Ohio (CCNO) is located at 03151 County Rd. 24.25 in Stryker, Ohio. It is overseen by a commission comprised of two members from each of five counties (Defiance, Fulton, Williams, Henry, and Lucas), being one commissioner and the sheriff from each county. These ten representatives make up the CCNO Board.

The members, along with a contract with the US Marshals Service, proportionately share in the cost of operating CCNO based on the number of beds each is allocated. In the past, CCNO has also worked with the state of Ohio to house offenders under grant programs. Bed selections for the members are reviewed annually, and selections are based on needs for each member. Currently beds are reserved as the following:

<u>Jurisdiction</u>	<u>Number of Beds</u>
Defiance County	60
Fulton County	55
Henry County	37
Lucas County	210
Williams County	58
US Marshals	220

The facility was built in 1990 and has a current rated capacity of 668 to include dormitory, single cell, and double cell housing. There is one main building and a second, stand-alone, two-story housing unit with 146 minimum status beds in two dormitory settings (one unit of 73 beds is designated for community workers). The remaining 12 housing units in the main building provide single cell (158 beds), double-celled (32 beds), and dormitory (332 beds) housing. Both males and females are housed at CCNO; juveniles and youthful offenders are prohibited by policy and state statute.

Electronic monitoring is provided via GPS to each of the five counties and their local municipalities. In 2019 there were 182 inmates on electronic monitoring. CCNO also operates a centralized transportation system for inmate transport. Inmates are released to their county of arrest.

The mission statement is to “protect the public, employees, and inmates while operating a cost-effective detention center for Defiance, Fulton, Henry, Lucas, and Williams Counties.”

Facility Demographics

Rated Capacity: **668**

Actual Population: **535**

Average Daily Population for the last 12 months: **557**

Average Length of Stay: **25 days**

Security/Custody Level: **Max, Med, Min**

Age Range of Offenders: **19-80 years**

Gender: **Male/Female**

Full-Time Staff: **191- 3** Administrative, **18** Support, **6** Program (contracted), **137** Security, **27** Other (contracted staff in food service and medical)

Part-Time Staff: **9** Security, **6** Medical (contracted)

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: 5

List of Standards Exceeded: 115.31, 115.32, 115.34, 115.41, 115.71

Standards Met

Number of Standards Met: 40

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met: Click or tap here to enter text.

Summary of Corrective Action (if any)

Standard 115.15(d)

The CCNO uses a security scanning system at the facility for all inmate intakes. During the site visit, the auditor observed the operation of the scanner while inmates were being screened. During this observation, it was noticed that this technology provided descriptive outlining of breasts, buttocks, and genitalia. Cross-gender use of this scanner does not comply with the PREA Standards. The auditor communicated the issue with executive staff and the Accreditation & Inspections Supervisor, and they immediately issued a security directive to all staff. The directive stated that effective immediately, cross-gender viewing and scanning with use of the Sotor RS is NOT permitted. Only same gender scanning will take place and CCNO policy is being updated to reflect this. CCNO policy 2302 (Body Scanner) was revised and provided to the auditor. The auditor reviewed the policy which is in compliance with this provision of the standard.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with inmates)
- Policy 1009 (Organizational Table)
- Policy 1003 (Code of Ethics and Conduct of Employees)
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection (a) The auditor reviewed the Jail's written PREA policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment, which outlines the Jail's approach to preventing, detecting, and responding to such conduct, covering all the elements of this subsection. The auditor found the policy to be complete and thorough, defining how the Jail will implement the approach to preventing, detecting, and responding to sexual abuse and sexual harassment.

Subsection (b) The agency employs an upper-level Accreditation & Inspections Supervisor who acts as the agency-wide PREA coordinator, Juli Steingass, who reports to the Executive Director. Interview conducted with the Accreditation & Inspections Supervisor indicated she has sufficient time and authority to develop, implement, and oversee the Jail's efforts to comply with the PREA standards.

Subsection (c) N/A- agency operates only one facility.

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.

CCNO does not contract with other entities for the confinement of inmates. Therefore, 115.12 is N/A

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 3003 (Hours of Work Day/Overtime/Flex Time)
- Policy 5105 (Inspections)
- Policy 2018 (Supervision, Cross Gender Supervision and Movement of Inmates)
- Review of Staffing Plan for CY-2018, CY-2019 and CY-2020
- CCNO Staffing Analysis CY-2020
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Intermediate- or Higher-Level Facility Staff
 - Executive Director
 - Director of Security

Subsection (a) A review of the agency policy, supporting documentation, and interviews conducted with the Executive Director and Accreditation & Inspections Supervisor indicates the CCNO develops, documents, and does their best to regularly comply with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against sexual abuse. The written staffing is required to be developed sufficiently in advance for internal review and approval. The auditor has determined the facility takes into account all (11) elements required of this subsection.

Subsection (b) In a review of the Jail's 2020 PREA annual report and staffing plan reviews for CY-2018, CY-2019, and CY-2020, the facility has not had to deviate from its original staffing plan. This was further confirmed through interviews with the Executive Director and Accreditation & Inspections Supervisor.

Subsection (c) At least once every year, and according to agency policy, submitted documentation and auditor interviews with the Executive Director and Accreditation & Inspections Supervisor, the facility, in collaboration with the Accreditation & Inspections Supervisor, reviews the staffing plan. This process is completed to see whether adjustments are needed to the staffing plan, the deployment of monitoring technology, or the possible allocation of facility resources to commit to the staffing plan to ensure compliance with the staffing plan. The written staffing plan is required to be developed sufficiently in advance for internal review and approval.

Subsection (d) A review of the agency policy, supporting documentation, and auditor interviews conducted with the Executive Director, Accreditation & Inspections Supervisor and Supervisory staff indicates the facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. During the facility onsite inspection, the auditor reviewed logbook entries documenting such rounds are occurring on both day and night shifts. Supervisory staff are assigned specific days of the week that they are required to conduct unannounced rounds, ensuring these types of rounds are conducted on a daily basis for all three shifts.

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.

CCNO complies with the standard to the extent that there are no youthful inmates ever housed at the facility. CCNO is an adult male/female facility.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 2300 (Searches)
- Policy 4110 (Transgender Inmates)
- Policy 3003 (Hours of Work Day/Overtime/Flex Time)
- Policy 5105 (Inspections)
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Random Staff
 - Random Inmates

Subsections (a)(c) CCNO policy states facility staff shall not conduct cross-gender strip searches or cross-gender visual body searches (meaning a search of the anal/genital opening) except in exigent circumstances or when performed by medical practitioners. Policy further states that the jail will document all cross-gender strip searches and cross-gender visual body cavity searches and will document all cross-gender pat-down searches of female inmates. According to the PAQ and the Auditor's interview with the Accreditation & Inspections Supervisor, the facility has not conducted any cross-gender pat-down searches or cross-gender strip searches during the audit period.

Subsection (b) CCNO policy states the facility does not permit cross-gender pat-down searches of female inmates absent exigent circumstances and does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with the provision of this standard.

Subsection (d) CCNO policy states and was further confirmed through the Auditor's interviews conducted with the Accreditation & Inspections Supervisor and random staff that the facility 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 to include viewing via video cameras. Facility staff of the opposite gender will announce their presence when entering an inmate housing unit (e.g., "MALE IN THE UNIT" when entering a Female housing unit, or "FEMALE IN THE UNIT" when entering a Male housing unit). The Auditor confirmed this practice during interviews conducted with inmates and observed staff announcing their presence when entering housing areas of the opposite gender. The CCNO uses a security scanning system at the facility. During the site visit, the auditor observed the operation of the scanner while inmates were being screened. During this observation, it was noticed that this technology provided descriptive outlining of breasts, buttocks, and genitalia. Cross-gender use of this scanner does not comply with the PREA Standards. The auditor communicated the issue with executive staff and the Accreditation & Inspections Supervisor, and they immediately issued a security directive to all staff. The directive stated that effective immediately, cross-gender viewing and scanning with use of the Sotor RS is NOT permitted. Only same gender scanning will take place and CCNO policy is being updated to reflect this. CCNO policy 2302 (Body Scanner) was revised and provided to the auditor. The auditor reviewed the policy which is in compliance with this provision of the standard.

Subsection (e) CCNO policy indicates facility staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's 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. According to the PAQ and the Auditor's interviews with the Accreditation & Inspections Supervisor and random staff, the facility has not

searched or physically examined a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

Subsection (f) The agency policy states and was further corroborated through the auditor interviews with the Accreditation & Inspections Supervisor, a random sample of staff, and provided training documentation that the CCNO shall train staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4108 (Americans with Disabilities Act)
- Pre-Service Training Lesson Plan
- Interviews:
 - Executive Director
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Random Staff
 - Inmates (with disabilities or who are limited English proficient)

Subsection (a) CCNO policy indicates that the jail has established procedures to provide disabled inmates an equal opportunity to participate in or benefit from all aspects of the CCNO's efforts to prevent, detect, and respond to sexual abuse and sexual harassment in accordance with subsection (a) requirement. The Auditor interviewed the Executive Director and Accreditation & Inspections Supervisor, who elaborated on the procedures and mechanisms that are in place to provide disabled inmates an opportunity to participate in or benefit from all aspects of the jail's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Auditor interviewed two LEP inmates. Both inmates required the use of interpretive services for the interview. They were able to explain the facility's processes for reporting allegations of sexual misconduct and indicated they had received sexual safety information upon intake and in a format that they were able to understand. Furthermore, both inmates recalled being asked questions upon intake for risk of sexual victimization and abusiveness.. The Auditor observed throughout the facility written materials, posters, pamphlets all in multiple languages advising inmates of their rights to be free from sexual abuse, sexual harassment & retaliation and how to report such.

Subsection (b) CCNO policy indicates, and it was further corroborated through auditor interviews with the Executive Director and Accreditation & Inspections Supervisor the agency has established procedures to provide inmates with limited English proficiency 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. The facility provides the necessary steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment involving inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Linguistic services are accessed via Interpreter.com.

Subsection (c) CCNO policy states and the auditor confirmed through interviews with the Accreditation & Inspections Supervisor and random staff that inmate interpreters, inmate readers, or other types of inmate assistants are prohibited except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations. In the past 12 months, the facility has reported no instances where inmate interpreters, readers, or other types of inmate assistants have been used.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 6004 (Filling of Positions)
- Policy 6006 (Pre-Employment Screening/Hiring Process)
- Policy 6010 (Performance Appraisal Reviews)
- Policy 6014 (Resignation and Post Employment Job Background Checks)
- Personnel files
- Interviews:
 - Human Resource Staff

Subsection (a)(b)(c)(d)(e)(f)(g)(h) The auditor reviewed Policy 6004 (Filling of Positions) which prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting 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 (H)(2) of this section. Policy 6006 (Pre-Employment Screening/Hiring Process) states the CCNO will; (1). Perform a criminal background check (NCIC) criminal background records check. (2); and 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. The CCNO will perform a criminal record check before enlisting the services of any contractor or volunteer who may have contact with inmates. Th CCNO will conduct criminal background record checks at least every five years of current employees. Contractors and volunteers who may have contact with inmates will have a criminal background check at least once a year. The CCNO will ask all applicants, employees, contractors, and volunteers who may have contact with inmates directly about previous misconduct described in Policy 6004 (Filling of Positions) 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 CCNO shall also impose upon employees, contractors, and volunteers a continuing affirmative duty to disclose any such misconduct. Material omissions regarding such misconduct, or provision of materially false information, shall be grounds for termination. Submitted with PAQ and while onsite the auditor reviewed employee personnel files and determined the facility is meeting the standards requirement in all material ways. The practice was further confirmed through an interview with the Human Resource Officer.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 2016 (Cameras)
- Review of the 2018 Staffing Plan
- Interviews:
 - Executive Director
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections (a)(b) Agency policy states when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the CCNO shall consider the effect of the design, acquisition, expansion, or modification upon the CCNO's ability to protect inmates from sexual abuse. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the CCNO will consider how such technology will enhance the CCNO's ability to protect inmates from sexual abuse. In 2018, the CCNO added twenty (20) cameras for monitoring purposes. The Auditor was provided with documentation that reflected what the facility considered for overall safety, including protecting inmates from sexual abuse in planning this technology upgrade.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5001 (Internal Investigations)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Policy 5005 (Criminal Activity on CCNO Property)
- Memorandum of Understanding (Williams County Sheriff's Office)
- Memorandum of Understanding (Williams County Victim Assistance)
- Investigation Training Certificates
- On-site review of completed PREA Sexual Abuse Investigations
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Random Staff
 - SAFEs/SANes Staff
 - CCNO Investigator
 - Williams County Sheriff's Office Investigator
 - Williams County Victim Assistance Staff

Subsection (a)(b)(c)(d)(e)(f)(g)(h)

CCNO policy states that sexual abuse investigations must adhere to the investigative and evidence protocols 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. CCNO policy requires all victims of sexual abuse have access to forensic medical examinations, whether on-site or at an outside facility where evidentiary or medically appropriate. The CCNO shall offer victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost. CCNO utilizes Williams County Hospital in Bryan Ohio for forensic exams and there were no inmates sent out for a forensic exam during the last 12 months. The auditor verified SANE/SAFE services are provided through Bryan Hospital. The auditor conducted a phone call interview with a representative from the Bryan Hospital who explained the SANE/SAFE services that would be provided if ever needed. Williams County Victim Services is the local community agency that provides support services to inmate victims of sexual assault incarcerated at CCNO. The auditor interviewed a Victim Assistant from Williams County Victim Assistance during the site visit. She confirmed emotional support services, crisis intervention services and victim services her agency provides to inmates based on the MOU Dated 4/19/21. The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. While on-site the auditor conducted a comprehensive review of five completed administrative investigations and determined all subparts of the standard were followed.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5001 (Internal Investigations)
- Memorandum of Understanding (Williams County Sheriff's Office)
- On-site review of completed PREA Sexual Abuse Investigations
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Executive Director
 - CCNO Investigator

Subsection (a)(b)(c) CCNO policy states, the CCNO shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The auditor confirmed this procedure and practice through interviews with the Accreditation & Inspections Supervisor, Executive Director, and facility Investigator. CCNO policy states it shall have in place a 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. The CCNO will document all such referrals. The CCNO shall publish such policy on its website or make the policy available through other means. The auditor reviewed the information posted on the agency website and found that it conforms to standards requirement. (https://www.ccnoregionaljail.org/Reporting_sexual_abuse.htm). The Williams County Sheriff's Office is responsible for conducting criminal investigations. Such referrals shall describe the responsibilities of both the CCNO and the Williams County Sheriff's Office. Williams County Sheriff's Office has in place a policy governing the investigation of sexual abuse or sexual harassment in the CCNO. In the past (12) months, the CCNO has received twenty-three (23) allegations of sexual misconduct. The auditor reviewed five (5) randomly selected investigations and determined that they were completed per the standards requirement.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 6101 (Staff Training- Full-Service Jail)
- PREA and Staff Sexual Misconduct Training Lesson Plan
- Training Records
- Interviews:
 - Random Staff

Subsections (a)(b) CCNO policy states and the auditor confirmed through random staff interviews and a review of completed staff training documentation that all employees receive PREA educational training in accordance with the standards requirement. Training includes individual completion of the PREA and Staff Sexual Misconduct Training on (1) The facility zero tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) An inmate's right to be free from sexual abuse and sexual harassment; (4) Staff and inmate's right to be free from retaliation for reporting sexual abuse and sexual harassment; (5) recognizing the dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian gay, bisexual, transgender, intersex, or gender nonconforming inmates; (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Facility training is tailored to the gender of inmates at the facility. The facility population is made up of both male and female inmates. Staff training reflects a mixed-gender mission and staffing. Interviews with staff clearly demonstrated the staff have been adequately trained and are well aware of the significance of PREA.

Subsections (c)(d) All staff shall receive PREA training annually during pre-service training. The facility also provides 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. The CCNO documents through employee signature or electronic verification, that employees understand the training they have received. This is also documented on their post-test. The Training Officer maintains an electronic copy of the training in the individual training records for each staff member. The auditor verified the above mentioned by reviewing staff training documentation submitted

with the PAQ and additional staff training documentation review while onsite and interviews conducted with random staff.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 6101 (Staff Training- Full-Service Jail)
- Policy 4200 (Community Corrections)

- Policy 4500 (Volunteer)
- Volunteer Agreement
- Security and Safety Rules for Contractors
- PREA and Staff Sexual Misconduct Training Lesson Plan
- Training Curriculum
- Interviews:
 - Volunteer(s) or Contractor(s) who have Contact with Inmates

Subsections (a)(b)(c) CCNO policy states all volunteers and contractors who have contact with inmates shall be trained on their responsibilities under the facility's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training provided to volunteers and contractors shall be based on the services they provide and the level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the facility's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The contractors and volunteers must acknowledge, by signature, that they received and understood this training. An exam on the PREA subject matter is given to each volunteer and contractor at the conclusion of the training. Due to Covid, there are zero volunteers currently entering the jail. The auditor interviewed two (2) contractors and they both clearly demonstrated that they were adequately trained. Contractors receive training annually at CCNO which exceeds in this standard requirement.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 2100 (Intake)
- Inmate Handbook
- Inmate Orientation Video
- PREA and Staff Sexual Misconduct Training Lesson Plan
- Training Curriculum
- Facility Site Inspection
- Interviews:
 - Intake Staff
 - Random Inmates

Subsections (a)(b)(c)(d)(e)(f) Agency policy states, during the intake process, inmates shall receive information explaining the CCNO's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse and sexual harassment. While onsite, the auditor conducted a site inspection of the facility's intake and was given a comprehensive briefing on the intake process for inmates arriving at the CCNO. Interview with intake staff and random inmates clearly demonstrated to the auditor; inmates receive the required PREA information upon intake. The auditor further confirmed the PREA intake procedures by reviewing inmate files, which demonstrated by inmate signature acknowledging receiving PREA information upon intake and comprehensive PREA education. Within thirty days of intake, the CCNO is responsible for providing comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and regarding CCNO policies and procedures for responding to such incidents. If for any reason an inmate has not received such education within the first 30 days, they shall receive the training subsequently (§115.33(c)-1); likewise, inmates shall receive education upon receipt from another facility to the extent that the policies and procedures differ from those of the previous facility; this will be accomplished by requiring transfers to get the same training as new confinements. The CCNO provides 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. The CCNO maintains documentation of inmate participation in these education sessions. In addition to providing such education, the CCNO ensures that crucial information is continuously and readily available or visible to inmates in housing units and other communal areas such as the galley through posters, Inmate Rules and Regulations, or other written formats. While onsite, the auditor observed key information posted throughout the facility, including in inmate living areas.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 6101 (Staff Training- Full-Service Jail)
- Investigative Staff Training Certificates
- Interviews:
 - CCNO Investigator
 - Williams County Sheriff's Office Investigator

Subsection (a)(b)(c)(d) CCNO policy states in addition to the general training provided to all employees pursuant to §115.31, the CCNO shall ensure that, to the extent the CCNO itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The CCNO shall maintain documentation that CCNO investigators have completed the required specialized training in conducting sexual abuse investigations. In reviewing the facility's investigator specialized training curriculum and completed training certificates, the auditor determined the facility has demonstrated their investigative staff has received advanced training when dealing with allegations of sexual misconduct within a confinement setting. This was further corroborated through the knowledge shown during an interview with the facility investigator. The Williams County Sheriff's Office conducts all criminal investigations at CCNO and has an MOU with the facility. CCNO requires the Williams County Sheriff's Office to comply with the provisions outlined in 115.34(b). Interviews with the CCNO investigator and the Williams County Sheriff's Office investigator clearly demonstrated that the investigators were adequately trained. Certificates also verified that both investigators completed the National Institute of Corrections PREA Investigating Sexual Abuse in a Confinement Setting.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 6101 (Staff Training- Full-Service Jail)
- Training Curriculum- PREA: What Medical Staff Must Know by the Southern Health Partners, Inc.
- Training Certificates
- Interviews:
 - Medical and Mental Health Staff

Subsection (a)(c)(d) CCNO policy states that agency medical and mental health care practitioners who regularly work in the facility shall receive the training mandated for staff under §115.31 and complete Medical and Mental Health Care Specialized Training. The CCNO shall ensure that all full-time and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in (a) How to detect and assess signs of sexual abuse and sexual harassment; (b) How to preserve physical evidence of sexual abuse; (c) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (d) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The auditor confirmed through the review of employee completed training documentation and curriculum that the requirements are covered in accordance with the standards requirement. Interviews were conducted with the Medical and Mental Health Team Administrator and a Medical Nurse. Both interviews indicated their knowledge of PREA and their role when dealing with allegations of sexual abuse and sexual harassment.

Subsection (b) 115.35 (b) is not applicable because medical staff employed by the CCNO do not conduct forensic examinations. Any forensic examinations are conducted by Bryan Hospital (which is not part of the agency), by certified SAFE or SANE nurses only.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4101 (Classification of Inmates)
- Policy 4300 (Medical/Mental Health Care Services for Inmates)
- Risk screening forms
- Facility Site Inspection
- Interviews:
 - Staff Responsible for Risk Screening
 - Random Inmates
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection (a)(b)(c)(d) CCNO policy states all inmates shall be assessed within 24 hours of arrival at the facility, utilizing the objective screening instrument which also applies to new intakes and transfers. The auditor reviewed the risk screening tool and found that it was an object screening tool containing all (10) elements required per the standard. During the site inspection, while in the intake area, the auditor received a comprehensive demonstration from intake staff on how a risk screening occurs when an inmate arrives at the facility. While onsite, the auditor randomly selected (5) inmate files to review their risk screening documentation upon entering the facility and their reassessment within thirty (30) days of arrival. Upon review, the auditor confirmed that the risk screening is being completed in accordance with the standards requirement. Auditor interviews with staff responsible for conducting risk screenings and follow-up risk screenings were very well-versed in the procedures for performing such a screening. It was apparent to the auditor the facility prides itself on the screening for risk of victimization and abusiveness and was reflected during staff interviews and the review of detailed risk assessment documentation.

Subsection (e) CCNO policy states and the auditor confirmed through interviews with staff responsible for conducting risk screening, and the review of completed inmate risk screening forms that the intake screening considers the following criteria to assess inmates for risk of being sexually abusive. (1) Prior acts of sexual abuse; (2) Prior convictions for violent offenses; and (3) History of prior institutional violence or sexual abuse, as known to the facility.

Subsection (f) CCNO policy states and the auditor confirmed through the review of completed risk inmate screening forms; interviews conducted with staff responsible for completing risk assessments within fourteen (14) days of arrival at the facility, medical staff reassess the inmate's risk of victimization or abusiveness. Interviews were also conducted with random inmates, who all corroborated they received a follow-up risk screening within two weeks of arrival.

Subsection (g) CCNO policy states and the auditor confirmed through the review of completed inmate screening forms; interviews conducted with staff responsible for completing risk assessments, an assessment is completed 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. The facility provided the auditor with completed risk assessments based on referrals and requests and found that they were conducted according to the standards' requirements.

Subsection (h) CCNO policy states and was further corroborated through interviews with staff responsible for completing risk screenings that inmates may not be 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.

Subsection (i) CCNO policy states that appropriate controls are in place for the dissemination within the CCNO 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. The auditor confirmed the above mentioned through interviews with staff responsible for conducting risk assessments and the Accreditation & Inspections Supervisor.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4101 (Classification of Inmates)
- Risk screening forms
- Memos- Accreditation & Inspections Supervisor
- Interviews:
 - Staff Responsible for Risk Screening
 - Random Inmates
 - Gay/Bisexual Inmates
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection (a) (b) CCNO policy indicates the classification staff shall use information from the risk screening required by §115.41 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. The CCNO will make individualized determinations about how to ensure the safety of each inmate. The auditor corroborated the aforementioned processes through the review of completed inmate risk screenings and interviews conducted with the Accreditation & Inspections Supervisor and risk screening staff.

Subsection (c) CCNO policy states in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the CCNO will consider shall consider whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems. The CCNO did not confine any transgender inmates during the site visit, therefore there were no transgender inmates for the auditor to interview.

Subsection (d)(e) CCNO policy further states that a transgender or intersex inmate's own view with respect to his or her own safety will be given serious consideration. Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. Classification staff discuss all of these issues, as well as the individuals own feelings and make a decision that ensures the safety of each inmate housed at CCNO without creating security issues. This process was corroborated through facility documentation review and interviews conducted with the Accreditation & Inspections Supervisor and staff responsible for conducting risk screening.

Subsection (f)(g) CCNO policy states transgender and intersex inmates will be given the opportunity to shower separately from other inmates. The CCNO will not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated units solely on the basis of such identification or status, unless such placement is in a dedicated unit established in connection with a consent decree, legal settlement, or legal judgement for the purpose of protecting such inmates. The CCNO did not confine any transgender inmates during the site visit, therefore there were no transgender inmates for the auditor to interview. The auditor interviewed two inmates who identified as gay/bisexual and confirmed they are not separated from the general population based on their identification status.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4103 (Segregation Housing)
- Memo- Accreditation & Inspections Supervisor
- Interviews:
 - Staff who supervise inmates in segregation housing
 - Director of Security

Subsections (a)(b)(c)(d)(e) CCNO policy indicates 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 CCNO cannot conduct such an assessment immediately, the CCNO may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Inmates placed in segregated housing for the purpose of protective custody shall have access to programs, privileges, education, and work opportunities to the extent possible. If the CCNO restricts access to programs, privileges, education, and work opportunities, the CCNO shall document (1) The opportunities that have been limited (2) The duration of the limitation; and (3) The reasons for such limitations. The CCNO 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 shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the CCNO shall clearly document (1) The basis for the CCNO's concern for the inmate's safety; and the reason why no alternative means of separation can be arranged. Every 30 days, the CCNO shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. Interviews with the Director of Security and the segregation supervisor confirmed the above-mentioned process would take place if the CCNO ever needed to place an inmate in involuntary segregated housing. The Director of Security and the segregation supervisor stated that the CCNO has never placed an inmate in involuntary segregated housing due to the high risk for sexual victimization. Furthermore, no inmates were held in involuntary segregated housing in the past 12 months for less than 24 hours awaiting completion of an assessment; and zero inmates in the past 12 months at risk of victimization were held in involuntary segregated housing for longer than 30 days while awaiting alternative placement.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Inmate Rules of Conduct and Handbook
- Facility Site Inspection
- Memorandum of Understanding- Northwest Ohio Juvenile Detention Center
- Interviews:
 - Random Inmates
 - Random Staff
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection (a)(b) CCNO policy states inmates have multiple internal ways to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates can report verbally, written, electronically, CCNO hotline and anonymously. The CCNO shall 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, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to CCNO officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. It should be noted that the CCNO does not house inmates detained solely for civil immigration purposes. The CCNO entered into an MOU, with the Northwest Ohio Juvenile Detention Center on 2/18/21. The Northwest Ohio Juvenile Detention Center acts as the public or private entity or office that is not part of the agency. While onsite and during the facility inspection the auditor placed a call to the CCNO hotline. The auditor received a response the same day. The auditor observed the reporting information posted in multiple areas of the facility to include on bulletin boards and next to inmate telephones. Interviews with random staff and inmates indicated to the auditor they are aware of the reporting mechanisms in place for inmates to report allegations of sexual abuse and sexual harassment.

Subsections (c)(d) CCNO policy states staff shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document any verbal reports. The CCNO shall provide a method

for staff to privately report sexual abuse and sexual harassment of inmates through the CCNO web page. The CCNO shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of the inmate. The auditor confirmed the above stated through interviews with random staff and inmates. Staff said they are required to report all allegations of sexual misconduct immediately and shall document the report as well.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Memorandum for the Record
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

The subject standard has been reviewed for compliance and the facility has been found to be exempt per DOJ interpretation. Rationale: The CCNO does not require administrative procedures to address inmate grievances regarding sexual abuse. Therefore, there is no requirement to exhaust administrative remedies before filing a grievance.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Inmate Rules of Conduct and Handbook
- Facility Site Inspection
- PREA Resource and Reporting Information
- Memorandum of Understanding- Williams County Victims Assistance
- CCNO Sexual Assault Prevention Pamphlet
- CCNO Zero Tolerance for Sexual Abuse and Sexual Harassment Poster
- Interviews:
 - Random Inmates
 - Random Staff
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b) CCNO policy indicates inmates shall have access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including the toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations, and for persons detained solely for civil immigration purposes, immigrant service agencies. The CCNO shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The CCNO shall 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. Victim Support Services are available to inmates by calling the national Hotline for Crime Victims. The number is provided to inmates, and they are made aware that the call may be monitored. The auditor corroborated the above noted through interviews with a random sample of inmates, Accreditation & Inspections Supervisor, random sample of staff and four (4) inmates who reported sexual abuse. The facility does not detain inmates solely for civil immigration purposes.

Subsection(c) CCNO policy states, the CCNO shall maintain a memorandum 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 CCNO shall maintain copies of agreements or documentation showing attempts to enter into such agreements. The auditor confirmed this is established via the Memorandum of Understanding with the Williams County Victims Assistance. The CCNO retains copies of the agreement and documentation demonstrating it has entered into such an agreement.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Inmate Rules of Conduct and Handbook
- Facility Site Inspection
- PREA Resource and Reporting Information
- CCNO Sexual Assault Prevention Pamphlet
- CCNO PREA Information Website

Subsection(a) CCNO policy indicates, and the auditor confirmed through review, procedures for third- party reporting of sexual abuse and sexual abuse and sexual harassment on behalf of inmates shall be posted in the housing unit, visitation area, common areas, and on the CCNO website. (<http://ccnoregionaljail.org/>)

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5001 (Internal Investigations)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Completed Sexual Abuse Investigations
- Staff PREA Training Documentation
- Medical and Mental Health Staff PREA Training Documentation
- Interviews:
 - Random Staff
 - Medical and Mental Health Staff
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b) CCNO policy requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse and sexual harassment that occurred in the facility, whether or not it is part of the CCNO; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in CCNO policy, to make treatment, investigation, and other security and management decisions. Interviews with Random staff clearly indicated to the auditor they are aware of the CCNO's requirement and their reporting duties. The auditor further confirmed this through the review of completed staff training documentation white onsite.

Subsection(c) CCNO policy states, unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners are required to report sexual abuse pursuant to paragraph (a) of this section and inform inmates of the practitioner's duty to report, and the limitations of confidentiality at the initiation of services. Interviews conducted with medical a mental staff confirmed they are aware of the requirements delineated within this subsection and understand their role as mandatory reporters.

Subsection(d) CCNO policy states, if the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, the facility shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws. Interviews conducted with the Director of Security and Accreditation & Inspections Supervisor indicated they have not had an inmate under the age of 18 or consider a vulnerable adult within the past twelve (12) months. However, if such an occurrence were to happen, they would fully comply with the standards requirement.

Subsection(e) CCNO policy states the facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the CCNO's designated investigators. In reviewing five (5) random investigations, the auditor determined the facility followed CCNO policy and procedures and the standard requirement. Interviews with the Director of Security and the Accreditation & Inspections Supervisor also confirmed, all allegations of sexual abuse and sexual harassment are referred to the designated investigators.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4101 (Classification of Inmates)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Memorandum for the Record- PREA Standard 115.62 Agency Protection Duties
- Interviews:
 - Random Staff
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection(a) CCNO policy states when the CCNO learns that an inmate is subject to substantial risk of imminent sexual abuse, it will take immediate action to protect the inmate. According to interviews conducted with the Director of Security, the Accreditation & Inspections Supervisor and random staff, there have been no instances of the facility learning that an inmate was at substantial risk of imminent sexual abuse in the last (12) months. The facility takes all allegations of sexual misconduct seriously. Though the facility has not determined any inmate to be at imminent risk for sexual abuse, documentation was provided reflecting that sexual abuse allegations in the last (12) months, the facility immediately separated the alleged perpetrator from alleged victim throughout the entirety of the investigation until ample documentation and facts were gathered to decide that the alleged victims were not at risk for sexual abuse or retaliation.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- CCNO Notification Documentation
- Interviews:
 - Director of Security

- Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections (a)(b)(c)(d) CCNO policy states upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Executive Director that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The CCNO shall document that it has provided such notification. The Executive Director when receiving such notification shall ensure that the allegation is investigated in accordance with these standards. In the last twelve (12) months, there were twenty-one (21) allegations received by the CCNO that an inmate was abused while confined at another facility. In the past twelve (12) months, there was one (1) allegation of sexual abuse that the CCNO received from another facility. Interviews with the Executive Director, the Accreditation & Inspections Supervisor and review of documentation indicates, that the CCNO made notifications within the time frames required by the standard.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Completed PREA Sexual Abuse Investigations
- Interviews:
 - Security Staff and Non-Security Staff First Responders
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b) Facility policy states and was further corroborated through interviews conducted with Security Staff and Non-Security Staff First Responders; upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to (1). Separate the alleged victim and abuser; (2). Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. (3). If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and (4). If the abuse occurred within a time period that still allows for the collection of physical evidence, 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 first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. There were twelve (12) allegations reported within the past twelve (12) months. The auditor reviewed five completed investigative files and supporting documentation and found that the facility responded in accordance with agency policy and procedures and in accordance with the standards requirement.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Completed PREA Sexual Abuse Investigations
- Interviews:
 - Security Staff and Non-Security Staff First Responders
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection(a) Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates) outlines the facility written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The auditor confirmed the above stated through review of the policy and interviews with the Director of Security and the Accreditation & Inspections Supervisor.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 1011 (Management Rights)
- Agreement between Corrections Commission of Northwest Ohio and CCNO Corrections Officers Association
- Agreement between Corrections Commission of Northwest Ohio and CCNO Supervisors Association
- Interviews:
 - Executive Director
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsection(a) CCNO policy states that neither the CCNO nor any other governmental entity responsible for collective bargaining on CCNO's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the CCNO'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. The auditor confirmed the above mentioned through review of CCNO agreements with the Corrections Officers Association and the Supervisors Association. The auditor further confirmed the above through interviews conducted with the Executive Director and the Accreditation & Inspections Supervisor.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Completed Investigations
- Retaliation Monitoring Documentation
- Interviews:
 - Executive Director
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b) CCNO policy states the CCNO shall establish 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 and shall designate which staff members or departments are charged with monitoring retaliation. The Human Resources Manager will monitor for retaliation against staff. Classification will monitor for retaliation against an inmate after receiving notification from the investigator of the allegation/investigation. The CCNO shall 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. The auditor reviewed five (5) completed investigations and retaliation documentation. It was determined that retaliation monitoring was conducted per agency policy and procedures and in accordance with the PREA standards requirement. Interviews with the Executive Director, Director of Security and Accreditation & Inspections Supervisor also confirmed the above mentioned.

Subsection(c)(d) CCNO policy states for at least ninety (90) days following a report of sexual abuse, the PREA CCNO shall monitor the conduct and treatment of inmates or staff who reported the 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. Items the CCNO should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance review or reassignments of staff. The CCNO shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. In the case of inmates, such monitoring shall also include periodic status checks. The auditor confirmed the above mentioned by reviewing completed investigative files/documentation for the monitoring of retaliation. Investigation documentation and interview with the Classification Staff Member, who is responsible for the monitoring of retaliation corroborated, such monitoring also includes periodic status checks.

Subsections(e)(f) CCNO policy states if any other individual who cooperates with an investigation expresses a fear of retaliation, the CCNO shall take appropriate measures to protect that individual against retaliation. The CCNO's obligation to monitor shall terminate if the CCNO determines that the allegation is unfounded.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4103 (Segregation Housing)
- Interviews:
 - Director of Security
 - Staff who Supervise Inmates in Segregated Housing

Subsection(a) CCNO policy states post-allegation protective custody and any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of 115.43. The CCNO has not used segregated housing to protect an inmate alleging sexual assault in the last twelve (12) months. Compliance based on policy review, interviews with the Director of Security and the Segregation Supervisor. The facility did not have any inmates in segregated housing (for risk of sexual victimization/who allege to have suffered sexual abuse, nor did the auditor note any such occurrences while conducting the facility site inspection.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5001 (Internal Investigations)
- Investigative Staff Training Certificates- PREA: Investigating Sexual Abuse in a Confinement Setting, PREA: Investigating Sexual Abuse in a Confinement Setting Advanced Investigations
- Memorandum of Understanding (Williams County Sheriff's Office)
- Memorandum for the Record- PREA Standard 115.71 Requirements
- Interviews:
 - Investigative Staff
 - Inmates who Reported Sexual Abuse
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b) CCNO policy states when the CCNO agency 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. Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations as required by 115.34. The auditor was provided with completed certificates of training. (PREA: Investigating Sexual Abuse in a Confinement Setting) and (PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations) through the National Institute of Corrections (NIC). All allegations of sexual abuse and sexual harassment are referred to the facility investigator. The facility investigator confirmed the above mentioned. All allegations of sexual abuse and sexual harassment are referred to the facility investigator. The auditor reviewed a random sample of five (5) investigations and found them completed in accordance with the standards requirement.

Subsections(c)(d) CCNO Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator according to their policy and protocols. When the quality of evidence appears to support a criminal prosecution, the investigative agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Interview with the facility investigator and reviewing a random sample of five (5) investigations confirmed the CCNO conforms to the standards requirement.

Subsection(e) CCNO policy states the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. The CCNO 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 the investigation of such an allegation.

Interview with the facility investigator and inmates who reported sexual abuse confirmed the aforementioned.

Subsection(f)(g)(h) CCNO policy states administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse. Administrative investigations 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. Criminal investigations 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. Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. Interview with the facility investigator and reviewing a random sample of five (5) investigations confirmed the CCNO conforms to the standards requirement. There have been no allegations in the last twelve (12) months that were criminal in nature; hence, none were referred for prosecution.

Subsections(i)(j)(k)(l) Per agency policy and interview conducted with the facility investigator, he retains all written reports referenced for as long as the alleged abuser is incarcerated or employed by the CCNO, plus five years. All staff and departments must provide the Accreditation & Inspections Supervisor all documentation for file, archive, and audit. The departure of the alleged abuser or victim from the employment or control of the CCNO shall not provide a basis for terminating an investigation. The Williams County Sheriff's Office and facility investigators conduct investigations into alleged sexual abuse and sexual harassment incidents pursuant to the above requirements. When outside agencies investigate sexual abuse, the CCNO shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. There were two (2) open investigations from 2020 due to the inmate being released and not responding to multiple attempts to contact them for statements. No State or Department of Justice entity conducted an investigation.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5001 (Internal Investigations)
- Completed Investigations
- Interviews:
 - Investigative Staff

Subsection(a) In a review of CCNO policy, completed investigations, and interview with the facility Investigator, the preponderance of the evidence - the greater weight of the evidence required to decide in favor of one side or the other is used. Preponderance is achieved when the evidence presented is even slightly on either side of an allegation. For example, a signed statement with definite terms and facts will outweigh opinions or speculation to the contrary. Hence, the preponderance of the evidence requires less certainty than “beyond a reasonable doubt,” which is the stricter test of evidence.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5001 (Internal Investigations)
- Completed Investigations
- Memorandum for the Record- PREA Standard 115.73 Requirements
- Interviews:
 - Investigative Staff
 - Inmates who Reported Sexual Abuse
 - Director of Security

Subsection(a)(b) CCNO policy states following an investigation into an inmate's allegation that he or she suffered sexual abuse in the CCNO, the CCNO Investigator shall inform the inmate as to whether the allegation has been determined to be substantiated unsubstantiated, or unfounded. If the CCNO Investigator did not conduct the investigation, the relevant information shall be requested from the Williams County Sheriff's Office in order to inform the inmate. Interviews with the CCNO Investigator, Director of Security, inmates who reported sexual abuse and the review of randomly selected investigations confirmed the CCNO conforms to this requirement.

Subsections(c)(d) CCNO policy states following an inmate's allegation that a staff member has committed sexual abuse against an inmate, the CCNO Investigator shall subsequently inform the inmate whenever (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The CCNO learns that the staff member has been Indicted on a charge related to sexual abuse within the CCNO; or (4) The CCNO learns that the staff member has been convicted on a charge related to sexual abuse within the CCNO. Following an inmate's allegation that he or she has been sexually abused by another inmate, the CCNO Investigator shall subsequently inform the alleged victim whenever: (1) The CCNO learns that the alleged abuser has been indicted on a charge related to sexual abuse within the CCNO; or (2) The CCNO learns that the alleged abuser has been convicted on a charge related to sexual abuse within the CCNO. Regarding allegations of sexual abuse by other inmates in the last twelve (12) months, the alleged abusers were neither indicted on a charge related to sexual abuse within the facility; nor had the alleged abusers been convicted on a charge related to sexual abuse within the facility. The facility had not had an incident reported where staff has allegedly sexually abused an inmate in the last twelve (12) months. Interview with the CCNO Investigator, interviews with inmates who reported sexual abuse and review of random investigations confirmed the CCNO conforms to the standards requirement.

Subsections(e)(f) CCNO policy states all such notifications or attempted notifications shall be documented. The CCNO's obligation to report to the victim under this standard shall terminate if the inmate is released from CCNO's custody. The auditor confirmed the above mentioned through an interview conducted with the CCNO Investigator and review of the investigative documentation.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 6105 (Employee Disciplinary Action)
- Memorandum for the Record- PREA Standard 115.76 Requirements
- Interviews:
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b)(c)(d) CCNO policy states staff shall be subject to disciplinary sanctions up to and including termination for violating CCNO sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of CCNO policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of CCNO sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies unless the activity was clearly not criminal and to any relevant licensing bodies. Memorandum for the record submitted as supporting evidence and interviews with the Director of Security and Accreditation & Inspections Supervisor indicated there had been zero staff from this facility have violated agency sexual abuse or sexual harassment policies over the last 12 months. Zero staff from the facility have been terminated (or resigned before termination) for violating agency sexual abuse or sexual harassment policies, as no violations have occurred over the last 12 months. In the past 12 months, zero staff from the facility have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies, as no violations have occurred over the last 12 months. Also, there have been no 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 had occurred, that the facility is aware of and would comply with, the requirement to report to law enforcement agencies unless the activity was clearly not criminal, and to any relevant licensing bodies.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Interviews:
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b) CCNO policy states and was further corroborated through interviews with the Director of Security and the Accreditation & Inspections Supervisor any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing or endorsement bodies. The CCNO takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of CCNO sexual abuse or sexual harassment policies by a contractor or volunteer. In the past 12 months, there have been zero contractors or volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in the sexual abuse of inmates. Interviews with the Director of Security and the Accreditation & Inspections Supervisor indicated they have not been required to take the appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. However, they would if the situation warranted.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4610 (Inmate Disciplinary Procedures)
- Memorandum for the Record- PREA Standard 115.78 Requirements
- Interviews:
 - Director of Security
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Medical and Mental Health Staff

Subsections(a)(b)(c)(d)(e)(f)(g) CCNO policy states all inmates shall 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. Sanctions shall 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. The disciplinary process shall 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. If the CCNO offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the CCNO shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. The CCNO may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. 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 shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The CCNO may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. The CCNO may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced. Interviews with the Director of Security, Medical and Mental Health Staff and the Accreditation & Inspections Supervisor along with the review of investigation files confirmed the CCNO conforms to this requirement.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4300 (Medical/Mental Health Care Services for Inmates)
- Memorandum for the Record- PREA Standard 115.81 Requirements
- Completed Screening for Risk of Victimization and Abusiveness
- Interviews:
 - Staff Responsible for Risk Screening
 - Medical and Mental Health Staff

Subsections(a)(c) CCNO policy states if the screening pursuant to § 115.41 indicates that an 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. The auditor reviewed completed risk screenings for inmates who have disclosed sexual victimization during the risk screening process and conducted them per the standard requirements. Interviews with facility staff who conduct risk screening were knowledgeable of the standards requirements and confirmed to the auditor that all standard elements are being completed.

Subsection(b) CCNO policy states if the screening pursuant to § 115.41 indicates that an inmate has previously perpetrated sexual abuse, 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 mental health practitioner within 14 days of the intake screening. This standard is not applicable to this facility. This facility is categorized as a jail.

Subsection(d)(e) CCNO policy states and was furthered confirmed through completed risk assessments and interviews conducted with medical and mental health personnel 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, or as otherwise required by Federal, State, or local law. 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.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 4300 (Medical/Mental Health Care Services for Inmates)
- Memorandum for the Record- PREA Standard 115.82 Requirements
- Interviews:
 - Medical and Mental Health Staff
 - Security Staff and Non-Security Staff First Responders

Subsections(a)(b)(c)(d) CCNO policy states 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. The auditor confirmed this through completed documentation review and interviews with medical and mental health staff. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to 115.62 and shall immediately notify the appropriate medical and mental health practitioners. 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. Documentation will be in the medical record of the victim. 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. There have been no reports of sexual abuse requiring emergency medical treatment and crisis intervention during the past twelve (12) months. Compliance based on policy review, interviews with medical and mental health practitioners and interviews with first responders.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Memorandum for the Record- PREA Standard 115.83 Requirements
- Interviews:
 - Medical and Mental Health Staff
 - Security Staff and Non-Security Staff First Responders
 - Inmates who Reported Sexual Abuse

Subsections(a)(b)(c)(d)(e)(f)(g)(h) CCNO policy states the CCNO shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lock- up or juvenile facility. 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. The CCNO shall provide victims with medical and mental health services consistent with the community level of care. Inmate victims of sexually abusive vaginal penetration while incarcerated, shall be offered pregnancy tests. If pregnancy results from the conduct described in paragraph (d) above, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. 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. A mental health specialist will attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning such abuse history and offer treatment when deemed appropriate by mental health practitioners is not applicable to this facility. This facility is categorized as a jail. There have been no ongoing medical and mental care requirements for sexual abuse victims and abusers during the past twelve (12) months. There have also been no instances of inmate victims of sexual abuse that have required ongoing medical or mental health services. Policy review along with interviews with medical and mental health practitioners, first responders and inmates who reported sexual abuse confirmed to the auditor that all standard elements are being completed.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Completed Sexual Abuse Incident Reviews
- Interviews:
 - Director of Security
 - Incident Review Team Member
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b)(c)(d)(e) CCNO policy states the CCNO shall 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. Such review shall ordinarily occur within 30 days of the conclusion of the investigation. An investigation is concluded when a substantiated, unsubstantiated, or unfounded determination is made by the facility Investigator. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The review team shall: (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 but not necessarily limited to determinations made pursuant to section (d)(1)-(d)(5) of this section and any recommendations for improvement and submit such report to the Executive Director and PREA compliance manager. The CCNO shall implement the recommendations for improvement or shall document its reasons for not doing so. Policy review, review of completed documentation (sexual abuse incident reviews) along with interviews with Accreditation & Inspections Supervisor, Director of Security and a Review Team Member confirmed to the auditor that all standard elements are being completed.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Agency Website
- Survey of Sexual Victimization, 2019

- PREA Annual Report 2020
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b)(c)(d)(e) CCNO policy indicates the facility shall collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The CCNO shall aggregate the incident-based data at least annually. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the SSV conducted by the Department of Justice. The CCNO shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30, or the deadline required by the Department of Justice. This facility does not contract with private facilities for the confinement of inmates. The Accreditation & Inspections Supervisor provided the auditor with documentation outlined within the standard reviewed by the auditor and found that it supported all the elements required of the standard.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Agency Website
- Survey of Sexual Victimization, 2019
- PREA Annual Report 2020
- Interviews:
 - Accreditation & Inspections Supervisor (Agency PREA Coordinator)
 - Executive Director

Subsections(a)(b)(c)(d) CCNO policy states and was further corroborated through documentation review and interviews with the Executive Director and Accreditation & Inspections Supervisor, that data is collected and aggregated in order to assess and improve the effectiveness of the facility's sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions. Such report shall include a comparison of the current year's data and corrective action with those of previous years and shall provide an assessment of the CCNO's progress in addressing sexual abuse. The CCNO's report shall be approved by the Executive Director and made readily available to the public through its website or, if it does not have one, through other means. The CCNO may redact specific material from reports when publication would present a clear and specific threat to the safety and security of the facility but must indicate the nature of the material redacted.

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.

Evidence Reviewed (documents, interviews, site review)

- CCNO Completed Pre-Audit Questionnaire (PAQ)
- Policy 5002 (Sexual Assault and Sexual Misconduct with Inmates)
- Agency Website
- PREA Annual Report 2017, 2018, 2019, 2020
- Interviews:

- Accreditation & Inspections Supervisor (Agency PREA Coordinator)

Subsections(a)(b)(c)(d) CCNO policy states and was further corroborated through documentation review and interview conducted with the Accreditation & Inspections Supervisor the CCNO shall ensure that data collected is securely retained. The CCNO shall make all aggregated sexual abuse data readily available to the public at least annually through its website or through other means. Before making aggregated sexual abuse data publicly available, the CCNO shall remove all personal identifiers. The CCNO shall maintain sexual abuse data collected for at least ten years after the initial collection date unless Federal, State, or local law requires otherwise.

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.

This is the second PREA audit for Corrections Center of Northwest Ohio (CCNO). The auditor had access to, and the ability to observe, all areas of the audited facility. The auditor requested and received copies of any relevant documents (including electronically stored information). The auditor was permitted to conduct private interviews with inmates, staff, and contractors. Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. The auditor received correspondence from inmates.

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 agency has published on its agency website the prior Final Audit Report. The review period is for prior audits completed during the past three years preceding this audit. The auditor confirmed this through the review of the agency website.

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.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Mark Stegemoller

07/24/2021

Auditor Signature

Date

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

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