

Disclaimer: This report, as required per 28 CFR §115.403, details the findings of an audit that was conducted by an outside contractor to determine the Federal Bureau of Prisons' (BOP) compliance with the Prison Rape Elimination Act (PREA). As the work product of independent auditors subcontracted by [PREA Auditors of America \(PAOA\)](#), the BOP is **not** responsible for grammatical or typographical errors. Additionally, any questions or comments regarding the discrepancies or inaccuracies found within this report should be directed to PAOA at [\(713\) 818-9098](#), or to the subcontracted independent auditor (name and email address can be found on page one of the report), for explanation and resolution.

PREA Facility Audit Report: Final

Name of Facility: FCI McKean

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/26/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Grace A Franks	Date of Signature: 12/26/ 2023

AUDITOR INFORMATION	
Auditor name:	Franks, Grace
Email:	gaf001984@gmail.com
Start Date of On-Site Audit:	11/14/2023
End Date of On-Site Audit:	11/16/2023

FACILITY INFORMATION	
Facility name:	FCI McKean
Facility physical address:	6975 Route 59, Lewis Run, Pennsylvania - 16738
Facility mailing address:	

Primary Contact	
Name:	Sandra Dinis
Email Address:	sdinis@bop.gov
Telephone Number:	814-362-8900

Warden/Jail Administrator/Sheriff/Director	
Name:	Julia Frith
Email Address:	jfrith@bop.gov
Telephone Number:	814-362-8900

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Colby Walter
Email Address:	c1walter@bop.gov
Telephone Number:	814-362-8900

Facility Characteristics	
Designed facility capacity:	1004
Current population of facility:	1105
Average daily population for the past 12 months:	1097
Has the facility been over capacity at any point in the past 12 months?	Yes

Which population(s) does the facility hold?	Males
Age range of population:	20-69
Facility security levels/inmate custody levels:	Medium, Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	227
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	6
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	16

AGENCY INFORMATION

Name of agency:	Federal Bureau of Prisons
Governing authority or parent agency (if applicable):	U.S. Department of Justice
Physical Address:	320 1st Street Northwest, Washington , Dist. Columbia - 20534
Mailing Address:	
Telephone number:	2023073250

Agency Chief Executive Officer Information:

Name:	Colette S. Peters, Director
Email Address:	bop-rsd-preacoordinator@bop.gov
Telephone Number:	(202) 307-3250

Agency-Wide PREA Coordinator Information

Name:	Cynthia Campagna	Email Address:	ccampagna@bop.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

1	<ul style="list-style-type: none"> • 115.31 - Employee training
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Number of standards met:

40	
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Number of standards not met:

0	
<p>Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.</p>	4

AGENCY AUDIT FINDINGS

Summary of Audit Findings

These standards were audited at the agency-level. For more information, please see the attached agency audit report found at the end of this document.

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

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor

determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

10

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-11-14
2. End date of the onsite portion of the audit:	2023-11-16

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	YWCA Bradford was contacted via telephone and verified that services are provided to FCI McKean for victims of sexual abuse.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1004
15. Average daily population for the past 12 months:	1097
16. Number of inmate/resident/detainee housing units:	13
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1107
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	3
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	75
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>5</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>4</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>5</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>FCI McKean does not track all of the specialized populations. Inmates identified for the specialized populations for the audit interviews were provided via a roster by medical, mental health, security, and the PREA Compliance Manager.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>233</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>14</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>2</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>20</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Rosters were reviewed of all the housing units. An inmate sampling for each housing unit was identified which considered age, race, ethnicity, and length of time in facility.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	23
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The medical department was unable to identify any inmates currently at the facility who met these criteria. This auditor asked all inmates interviewed as well if they had a visual impairment.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>5</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>5</p>

<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>4</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>4</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>FCI McKean had no occurrences of housing individuals in segregated housing involuntarily for risk of sexual victimization. This auditor inquired with victims who were interviewed and those who reported as well as segregated housing unit staff.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>

Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	15
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
If "Other," describe:	This auditor ensured that a sampling of female staff was interviewed.
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	27

76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Interviewed the Employee Development Manager regarding staff training.
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No volunteers were available on-site to interview during the on-site audit.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>This auditor was provided access to all areas of the facility, was able to view all cameras and documentation requested was provided.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Employee, volunteer, and contractor training files were reviewed. Personnel files for new hires and current staff were sampled. This auditor reviewed documentation throughout the facility during the facility tour (i.e. intake paperwork, log books).</p>
<p>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</p>	
<p>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</p>	
<p>Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.</p>	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	8	0	8	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	8	0	8	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	4	0	4	0
Total	5	0	5	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	6	2	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	6	2	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	0	0
Staff-on-inmate sexual harassment	0	4	0	0
Total	0	5	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

4

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>4</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There were no staff-on-inmate sexual abuse files reviewed because there were none reported in the last twelve months. There were no criminal investigation files to review because there were no criminal investigations in the last twelve months.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>Corrections Consulting Services</p>
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Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11 (a)</p> <p>The Program Statement for Sexual Abusive Behavior Prevention and Intervention Program (P.S. 5324.12) provides the written policy that implements zero tolerance toward all forms of sexual activity, including sexual abuse and sexual harassment. The program statement also provides guidelines to help to detect, prevent, and respond to incidents of sexual abuse or sexual harassment. FCI McKean is compliant with this provision of the standard.</p> <p>115.11 (b)</p> <p>The Federal Bureau of Prisons (BOP) employs a National PREA Coordinator and six Management Analysts at the agency level who work specifically with the facilities under the jurisdiction of the BOP. The PREA Coordinator is agency-wide and reports to the Assistant Director of the Reentry Services Division as evidenced by the organizational chart provided to this auditor. The PREA Coordinator was interviewed and stated that she has enough time to manage all PREA responsibilities as the</p>

	<p>position is full-time. There are 122 PREA Compliance Managers, one per institution, throughout the BOP. The PREA Compliance Managers work with the PREA Coordinator through regular calls, emails, trainings, and in-person meetings. An internal auditing process exists where facilities are audited internally for compliance and where deficiencies are found the PREA Coordinator works with Regional Coordinators, PREA Compliance Managers, and Wardens to bring the facility into compliance. FCI McKean is compliant with this provision of the standard.</p> <p>115.11 (c)</p> <p>FCI McKean has a designated PREA Compliance Manager which is the Associate Warden. The Associate Warden reports directly to the Warden. The PREA Compliance Manager (PCM) was interviewed and reports that she has enough time to manage all of the PREA related responsibilities. The PCM reports that she reviews all investigation reports, does rounds to ensure postings are up where they should be, provides training to staff, volunteers, and contractors on PREA, ensures all staff have their PREA cards, receives, and processes the email tips, and reviews all handout to inmates for accuracy. If issues are identified with PREA compliance the PCM consults with the PREA Coordinator, provides training if needed, and reviews policies. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12 (a)</p> <p>As per P.S. 5324.12, all contracts for the confinement of inmates shall include the entity's obligation to adopt and comply with the PREA Standards. There are no current open contracts to house inmates.</p> <p>115.12 (b)</p> <p>P.S. 5324.12 states that the BOP must ensure that its contracts with secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers include their obligation to adopt and comply with the PREA Standards. The Privatization Management Branch and Residential Reentry Management Branch field staff include PREA compliance monitoring within their scheduled contract monitoring activity.</p> <p>This standard is not applicable to FCI McKean. FCI McKean has no contracts with private agencies or other entities for the confinement of inmates. FCI McKean is compliant with all provisions of the standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.13 (a)</p> <p>As per P.S. 5324.12, the BOP shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and where applicable video monitoring to protect inmates from sexual abuse. This auditor reviewed documentation from the PREA Compliance Manager (PCM) indicating that FCI McKean’s staffing plan provides adequate staff resources to protect inmates from sexual abuse as required by PREA. The documentation states that the assessment is conducted during Quarterly Salary/ Workforce Utilization Subcommittee meetings and each pay period centralized staffing reports are prepared and reviewed. The documentation notes that video monitoring is reviewed and discussed during the quarterly meeting as well. This auditor also received the meeting minutes from the September 2023 quarterly meeting which included staffing reports and a verification that PREA was considered, deviations were reviewed (there were none), staffing levels were discussed to assist in the protection against sexual abuse and video monitoring was reviewed. The PCM signs off on this along with the Warden. All considerations required by this standard are reviewed during these quarterly meetings. P.S. 5324.12 notes that the Human Resource Management Division and Administration Division, Central Office, must consider PREA factors and safety, in general, when allocating overall staffing resources. At the institutions, the Salary/Workforce Utilization Committee Meeting Minutes serve as the staffing plan. The Warden and the PCM were interviewed and verified that the facility has a staffing plan that considers how to protect inmates against sexual abuse. The Warden and PCM verified that all considerations required by this provision of the standard are made when evaluating the staffing plan. FCI McKean is compliant with this provision of the standard.</p> <p>115.13 (b)</p> <p>As per P.S. 5324.12, deviations are documented in the remarks section of the Salary/ Workforce Utilization Committee Meeting Minutes. There were no deviations as per the PAQ and the meeting minutes reviewed by this auditor. As per the Warden deviations would be documented, however there were no occurrences of deviations in the last twelve months. FCI McKean is compliant with this provision of the standard.</p> <p>115.13 (c)</p> <p>As per the documentation reviewed by this auditor, there is a quarterly review conducted of the facility staffing and video monitoring systems. P.S. 5324.12 notes that at a minimum, the most recent Salary/Workforce Utilization Committee Meeting minutes are annually compiled by the Regional PREA Coordinator by May 1 and submitted to the National PREA Coordinator by June 1. As per the PREA Coordinator, an annual review of the staffing plan is provided to her for review. FCI McKean is</p>

	<p>compliant with this provision of the standard.</p> <p>115.13 (d)</p> <p>As per the P.S. 5324.12 and the FCI McKean supplement to the Sexually Abusive Behavior Prevention and Intervention Program, unannounced rounds by supervisory staff are conducted with the intent of identifying and deterring sexual abuse and sexual harassment are conducted every week to include all areas and all shifts. The Institution Duty Officer conducts and documents unannounced rounds. The PREA Compliance Manager maintains this documentation at the institution. This auditor was provided with sample documentation of the unannounced rounds indicating rounds are conducted throughout the facility and on varying shifts. Five staff who conduct unannounced PREA Rounds were interviewed. All five note that rounds are conducted randomly, throughout all shifts and all areas of the facility. All five staff interviewed note that PREA Rounds are documented in the electronic system. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.14 FCI McKean does not house youthful offenders. All inmates are 18 years of age or older as evidenced by inmate rosters, this auditor's observations, and interviews with staff and inmates while on-site.</p> <p>This auditor finds FCI McKean to be compliant with this standard as it is not applicable.</p>

115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.15 (a)</p> <p>P.S. 5324.12 refers to Program Statement (P.S.) 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas which states that the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Visual searches are to be conducted by staff of the same gender as the inmate, except where circumstances as</p>

such that a delay would mean the loss of contraband. In such a case, this exception would be documented in the inmate's file. As per 5521.06 only qualified health personnel, upon the approval of the Warden, can conduct body cavity searches. All body cavity searches are to be documented in the inmate's file. As per the PAQ there have been no cross-gender strip or cross gender visual body cavity searches of inmates in the twelve months preceding this audit. FCI McKean is compliant with this provision of the standard.

115.15 (b)

There are no female inmates housed at FCI McKean, therefore this provision of the standard does not apply. A review of the daily population report for the previous twelve months, interviews with staff and inmates on-site, and this auditor's observations during the facility tour indicated that there were no female inmates housed at this facility in the previous twelve months. FCI McKean is compliant with provision b. of this standard.

115.15 (c)

BOP P.S. 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas states that visual searches are to be conducted by staff of the same gender as the inmate, except where circumstance as such that a delay would mean the loss of contraband. In such a case, this exception would be documented in the inmate's file. As per 5521.06 only qualified health personnel, upon the approval of the Warden, can conduct body cavity searches. All body cavity searches are to be documented in the inmate's file. The facility does not house female inmates, therefore there has been no cross-gender pat searches of female inmates. Interviews with staff while on-site confirm that there are no females housed in the facility. FCI McKean is compliant with provision c. of this standard.

115.15 (d)

P.S. 5324.12 states that the facility shall implement policies and procedures that enable inmates to shower, perform bodily function, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The program statement states that inmates are only to shower, perform bodily functions, and change clothing in designated areas of the housing unit. P.S. 5324.12 as well as FCI McKean's Institution Supplement MCK 5324.12e also outlines the requirements for announcing the presence of opposite-gender staff members. The policy provides four notifications to inmates. 1) Inmates are advised of the requirement to remain clothed, and the presence of cross-gender staff at intake and orientation. 2) Notices are posted on inmate bulletin boards and signs within housing units stating that both male and female staff routinely work and visit inmate housing areas. 3) For housing unit officers, an announcement is made at the beginning of the shift or at a designated time to notify that staff of the opposite gender will be working in that unit. 4) For staff that are assigned to work within the unit a schedule is available for inmates to view that indicates when staff of the opposite gender will be on the housing unit. Opposite gender staff who are not assigned to the housing unit

area and must go into the individual cells, showers, or bathroom areas must announce themselves when entering the unit. A memo from the Warden of FCI McKean dated September 8, 2023 states that the facility adheres to the PREA National Policy, which enables inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia. As per the memo there have been no instances that required deviation from the cross-gender viewing limitations. All fifteen random staff interviewed, and nineteen of the twenty random inmates interviewed reported that female staff always announce their presence when entering a housing unit for male inmates. All fifteen random staff and all twenty random inmates interviewed stated that inmates can dress, shower, and use the toilet without being viewed by staff of the opposite gender. During the on-site tour, one deficiency was noted in a bathroom where a mirror showed the first urinal. This deficiency was corrected on-site by putting the urinal out of service. FCI McKean is compliant with this provision of the standard.

115.15 (e)

P.S. 5324.12 states that the facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the genital status is unknown, it may be determined through conversation with the inmate, reviewing medical records, or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. A memo from the Warden of FCI McKean dated September 8, 2023 was provided to this auditor, which states that FCI McKean prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. As per the PAQ, no searches of this nature were conducted in the last twelve months. All twenty random staff interviewed noted that searching or physically examining individuals solely to determine their genital status is prohibited. All five transgender inmates interviewed stated that they were never searched or physically examined to determine their genital status and they were never placed in a housing unit only for transgender inmates. FCI McKean is compliant with this provision of the standard.

115.15 (f)

As per the PAQ all staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. This auditor was provided with roster of staff who completed the Search and Restraint Procedures for Special Populations, the annual Escort Procedures lesson plan which includes pat searches, and the training completion log indicating all staff received the annual update. All fifteen random staff interviewed stated that they received training on cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. The staff were able to elaborate that this training is annual and is a video which shows how to conduct the searches properly. FCI McKean is compliant with this provision of the standard.

	FCI McKean is complaint with all provisions of this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.16 (a)</p> <p>P.S. 5324.12 states and the Agency Head reiterated during interview that Institution PREA Compliance Managers are responsible for reaching out to the local disability assistance offices as a resource to ensure the facility provides effective communication accommodation when needed. P.S. 5324.12 states that staff are to take reasonable action to ensure that available methods of communication are provided to all inmates with disabilities for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment. A memo dated September 8, 2023, from the Warden states that FCI McKean utilizes the LanguageLine with inmates who are limited English proficient (LEP), and the facility has access to community resources if needed for individuals with disabilities. As per the memo these services are coordinated on a case-by-case basis. The Sexually Abusive Behavior Prevention and Intervention Program Institution Supplement MCK 5324.12e states the language line is available for LEP inmates, and that the Compliance Manager will take appropriate steps to ensure that inmates with disabilities or LEP are provided with effective communication accommodations when needed through local interpretation services. This auditor tested the LanguageLine to verify it is active. During the on-site portion of the audit five inmates who are limited English proficient, two inmates who are cognitively impaired, one inmate with a physical disability, and one inmate who is hard of hearing was interviewed. Of the nine inmates interviewed, eight reported being provided information on PREA, how to report, and their rights in the institution. This auditor was provided with Spanish samples of documents provided to inmates and all housing units had information in both Spanish and English. FCI McKean is compliant with this provision of the standard.</p> <p>115.16 (b)</p> <p>P.S. 5324.12 states that Institution PREA Compliance Managers are responsible for reaching out to available interpretation services to ensure the facility provides effective communication accommodations when a need for such an accommodation is known. P.S. 5324.12 states that staff are to take reasonable action to ensure that available methods of communication are provided to all inmates who are limited English proficient for complete access to its efforts of preventing, detecting, and</p>

responding to sexual abuse and sexual harassment. A memo dated September 8, 2023, from the Warden states that FCI McKean utilizes the LanguageLine with inmates who are limited English proficient (LEP). The Sexually Abusive Behavior Prevention and Intervention Program Institution Supplement MCK 5324.12e states the language line is available for LEP inmates. This auditor was provided with the LanguageLine number and the Client ID number and ensured that it was functional. The Blanket Purchase Agreement for LanguageLine was also provided to this auditor and a listing of all languages included with the service. FCI McKean is compliant with this provision of the standard.

115.16 (c)

P.S. 5324.12 states that the agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay could compromise an inmate’s safety, the performance of first responder duties, or the investigation. Fifteen random staff were interviewed on-site and all reported that inmate interpreters are not used for investigations of any kind. Staff interviewed referenced the language line. FCI McKean is compliant with this provision of the standard.

This auditor finds that FCI McKean is compliant with all provisions of this standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.17 (a)</p> <p>P.S. 5324.12 states that the agency will not hire or promote anyone who may come in contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates if they have: engaged in sexual abuse in prison, jail, lockup or any other institution; been convicted of engaging or attempting to engage in sexual activity in the community or has been civilly or administratively adjudicated to have engaged in sexual abuse by force, overt or implied threats of force or coercion. The BOP Recruitment pamphlet and the Questionnaire for Public Trust Positions were reviewed by this auditor, and both have a section stating that all individuals wanting to be employed by the Bureau will be subject to a background check. The Pre-Employment Guide and the Human Resource Management Manual (P.S. 3000.03) outlines the background check requirement as well as exceptions, responsibilities, and how derogatory information uncovered is handled. This auditor reviewed employee personnel files with the Human Resource staff interviewed to ensure that background checks are completed on new employees and current employees. Each file for new employees has a Certification of Investigation. The Human Resource staff interviewed also stated that background checks are conducted for all new employees, those considered for promotions, and contractors who may have contact with</p>

inmates. This auditor finds FCI McKean to be compliant with this provision of the standard.

115.17 (b)

The Federal Bureau of Prisons considers incidents of sexual harassment in determining whether to hire or promote or enlist the services of any contractor who may have contact with inmates. The General Employment Considerations for Staff indicates that the applicant's character or past conduct might impose a statutory bar to employment or impede employment by adversely impacting on the Bureau's efficiency by jeopardizing the ability to accomplish its mission successfully. The Human Resource staff interviewed verified that the facility considers prior incidents of sexual harassment when determining whether to hire or promote anyone who may have contact with inmates. FCI McKean is compliant with this provision of the standard.

115.17 (c)

The BOP Recruitment pamphlet indicates that employment is subject to satisfactory completion of a background investigation, which also includes law enforcement and criminal records checks, credit checks, inquiries with previous employers and personal references. The Human Resource staff interviewed confirm that new employees receive background checks before hire and if previously employed at an institution, attempts are made to contact those employers for information of substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. This auditor reviewed new employee files to ensure background investigations were included. Each file has a Certificate of Investigation indicating the investigation was completed and there were no issues identified. FCI McKean is compliant with this provision of the standard.

115.17 (d)

Bureau of Prisons P.S. 3000.03, Indicates that the agency performs background checks before enlisting the services of any contractor who may have contact with inmates via a check of the National Crime Information Center (NCIC). As per the Human Resource staff interviewed contractors must have a background check prior to access to the facility. The contractors at FCI McKean are medical staff and receive their background checks every five years. FCI McKean is compliant with this provision of the standard.

115.17 (e)

The Bureau of Prisons utilizes the National Background Investigation Bureau (NBIB). All employees are fingerprinted, and all subsequent FBI criminal arrest information is forwarded through NBIB back to the agency. P.S. 3000.03 states that all positions are subject to five-year reinvestigations. As per the Human Resource staff interviewed employees and contractors receive background checks every five years. The Human Resource staff interviewed provided examples to this auditor. FCI McKean is compliant with this provision of the standard.

	<p>115.17 (f)</p> <p>A review of the eligibility questions on the USAJobs Application indicated that the three questions are required to be answered electronically for all applicants. As per the Human Resource staff interviewed, the questions regarding previous misconduct regarding PREA violations is included in the USAJobs Questionnaire when applying for jobs and it is also asked as part of the interview. The Human Resource staff also reports that the staff have a duty to report any information regarding sexual abuse or sexual harassment misconducts within an institutional setting. FCI McKean is compliant with this provision of the standard.</p> <p>115.17 (g)</p> <p>The Questionnaire for Public Trust Positions indicates that falsifying or concealing facts is a felony which can result in fines and up to five years in prison. FCI McKean is compliant with this provision of the standard.</p> <p>115.17 (h)</p> <p>This auditor received a memo for review dated February 28, 2014, stating that these requests are to be sent to Internal Affairs for processing. As per the memo and an email regarding the requests from non-BOP employers from the Chief of Internal Affairs, a consent to release the information should accompany the request from the institutional employer. Examples of these requests were provided to this auditor. The Human Resource staff reported that if received she would provide the information and they send for the information after the interviews. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.18 (a)(b)</p> <p>As per the PAQ, auditor observations on-site, and interviews with the Warden and the PREA Compliance Manager, FCI McKean has had no upgrades to the facility or video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. FCI McKean is compliant with all provisions of this standard.</p>

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

Auditor Discussion

115.21 (a)

FCI McKean is responsible for conducting administrative sexual abuse investigations only. The Federal Bureau of Investigation (FBI) and the Office of the Inspector General (OIG) are responsible for conducting criminal sexual abuse investigations. All fifteen random staff interviewed identified SIS, which is the institutional special investigative staff for the BOP, as being responsible for conducting investigations for PREA. SIS is responsible for conducting administrative investigations and they refer to OIG and FBI if it is criminal. The Prison Rape Elimination Act Investigation Policy Memorandum dated July 9, 2014, outlines the uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The policy outlines evidence preservation, medical examinations, forensic crime scene investigation with biological evidence, handling biological evidence and detecting and testing forensic evidence. All fifteen staff interviewed stated that they were aware of and understand the Agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. Staff interviewed state that they do not collect evidence, but they would secure the scene and ensure the inmates involved did not change clothing, take a shower, use the bathroom, or brush their teeth. Staff referenced the Evidence Recovery Team (ERT) as being responsible for collecting evidence. This auditor was provided with the First Responder Reference Guide which also states that step 2 of the protocol is to maintain the crime scene and evidence using chain of custody protocol. FCI McKean is compliant with this provision of the standard.

115.21 (b)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program and The Prison Rape Elimination Act Investigation Policy Memorandum dated July 9, 2014, state that medical forensic examinations are conducted in accordance with standards set forth in "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents, DOJ Office of Violence Against Women, second edition, April 2013. FCI McKean is compliant with this provision of the standard.

115.21 (c)

P.S. 5324.12 states that when there is a report of a recent incident of sexual abuse, or there is a strong suspicion that a recent serious assault may have been sexual in nature, a physical examination of the alleged victim is conducted. As per P.S. 5324.12 the victim is provided the opportunity for a forensic examination as soon as possible. The Prison Rape Elimination Act Investigation Policy Memorandum dated July 9, 2014, indicates that all inmate victims of sexual abuse are offered a forensic medical examination, whether on-site or at an outside facility, without financial cost. A memo from the Warden dated September 8, 2023 states that FCI McKean offers forensic medical examinations without financial cost to the victim. As per the memo, forensic examinations are conducted at either the local hospital or the local rape

crisis center. The FCI McKean institution supplement for P.S. 5324.12 states that health services is responsible for ensuring full consideration of the victim's transport to an outside hospital for a rape kit and for any related physical health care measure that cannot be accomplished at the institution, and follow-up treatment. As per MCK 5424.12d and medical staff interviewed FCI McKean will utilize Bradford Regional Medical Center to conduct forensic medical examinations following the report of an alleged sexual assault. As per the PAQ there have been no inmates sent out for forensic medical examinations in the last twelve months. FCI McKean is compliant with this provision of the standard.

115.21 (d)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the Institution PREA Compliance Manager is to attempt to enter into an agreement with a rape crisis center to make available a victim advocate for inmates being evaluated for the collection of forensic evidence. FCI McKean has an agreement with YWCA Bradford. This auditor received a copy of the agreement for review. There are also six staff of FCI McKean who received specialized training as Victim Advocates. This auditor received a copy of their training records indicating they were trained. As per the PREA Compliance Manager (PCM) inmates also have access to Pennsylvania Coalition Against Rape (PCAR) and YWCA-Bradford at all times from the inmate phones and their addresses are provided in the inmate handbook. A victim advocate is always available if needed. Of the four inmates interviewed who reported sexual abuse two report that resources are available, but they did not utilize them. One of the two inmates who were aware of the resources available reported they saw the psychology staff at FCI McKean and didn't need anything more. Two of the inmates who reported sexual abuse stated that they did not receive services.

This auditor observed throughout the facility the signage with the information for PCAR and above every inmate telephone is the number for PCAR. This auditor finds FCI McKean to be in compliance with this provision of the standard.

115.21 (e)

BOP Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that as requested by the victim, the victim advocate, qualified agency staff member or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews. The agreement with YWCA Bradford Victims' Resource Center outlines these services. As per the PAQ there were no inmates sent out for forensic medical examinations in the last twelve months. A memo from the Warden, dated September 8, 2023 further states that no agency staff accompanied a victim for a forensic examination. The PCM stated that staff who act as advocates must receive the specialized training, which this auditor received the training records for six staff, and the staff from PCAR and YWCA Bradford are trained victim advocates. FCI McKean is complaint with this provision of the standard.

115.21 (f)

The Federal Bureau of Investigation (FBI) and the Office of the Inspector General (OIG)

are responsible for conducting criminal investigations for the Bureau of Prisons. Both investigating entities follow the requirements of this standard. This auditor was provided with training records for OIG staff indicating completion of PREA Training as well as the syllabus for the training. The FBI agents complete all required training in the New Agent Training Program. All the training required in this standard is met through their overall training program including legal training, interviewing techniques, and evidence collection. The FBI also provides annual refresher training on various topics. This auditor reviewed the MOU with the FBI and a memo dated April 2, 2014, from the FBI General Counsel indicating that the FBI meets the requirements of this standard due to the training requirements of agents. This auditor finds FCI McKean to be in compliance with provision f. of this standard.

115.21 (h)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that a qualified agency staff member shall be an individual who has been screened for appropriateness to serve in the role of advocate and has received education concerning sexual assault and forensic examination issues in general. A qualified agency staff member meets the education requirement of this section by virtue of his or her degree or vocational training or through specialized training offered by the Bureau. This auditor reviewed training records indicating that six FCI McKean staff completed specialized victim advocate training. A review of the Lesson Plan for Forensic Medical Examinations: An Overview for Victim Advocates was reviewed and meets the specialized training requirement for victim advocates. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.22 (a)</p> <p>BOP Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. As per the Agency Head, all allegations are investigated. The Agency Head further stated that the investigative process is initiated immediately following the receipt of an allegation of sexual abuse or sexual harassment. The Agency Head described the investigation process as such; the Office of the Inspector General (OIG) of the Department of Justice investigates potential criminal cases involving staff on inmate sexual abuse. The Office of Internal Affairs (OIA) of the Bureau of Prisons investigates administrative cases of staff on inmate sexual abuse or harassment. Institution investigative staff, the Special Investigative Services (SIS) investigates all</p>

other cases. When an inmate-on-inmate allegation of sexual abuse is deemed possibly criminal in nature, it is referred to the Federal Bureau of Investigation (FBI) for investigation. OIG, OIA, SIS and FBI, review the allegation and predicated information. Substantiated allegations for administrative investigations or criminal prosecutions are based on corroboration of witnesses and victim statements, predicated information, along with physical evidence. As per the PAQ there have been 13 allegations of sexual abuse and sexual harassment that were received in the last twelve months. As per the PAQ, all 13 resulted in administrative investigations and none resulted in criminal investigations. On-site, this auditor reviewed 8 investigations from the preceding twelve months. This auditor reviewed all eight investigation files to ensure they were completed. FCI McKean is compliant with this provision of the standard.

115.22 (b)

P.S. 5324.12 outlines the administrative and criminal investigative process. Administrative investigations are conducted by SIS, criminal investigations regarding staff are conducted by OIG, and criminal investigations which are inmate-on-inmate are conducted by the FBI. All referrals to OIG would be documented in the administrative investigation file and maintained with updates by the SIS. The investigation process is available on the BOP website under policies, "Sexual Abusive Behavior Prevention and Intervention Program." P.S. 5508.02, Hostage Situations or Criminal Actions Requiring FBI Presence, confirms that the FBI is responsible for conducting criminal investigations related to Title 18 and/or any criminal activities at Bureau facilities. P.S. 5508.02, which describes the FBI's authority to conduct criminal investigations, is available on the BOP website. This auditor interviewed two investigative staff while on-site and both report that criminal investigations are referred to the FBI. No investigations were referred to OIG or FBI within the last twelve months. FCI McKean is compliant with this provision of the standard.

115.22 (c)

P.S. 5324.12 outlines the administrative and criminal investigative process and P.S. 5508.02 outlines the FBI's role in criminal investigations within the BOP. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.31 (a)
	P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program and the

facility supplement MCK 5324.12e, state that all staff will receive the Sexually Abusive Behavior Prevention and Intervention Program training during institutional familiarization and yearly thereafter as part of the annual refresher training. A review of the Sexually Abusive Behavior Prevention and Intervention Program curriculum outline and PowerPoint slides confirmed that the training includes information on: the agency's zero tolerance policy, how to fulfill their responsibilities under the agency's sexual abuse and sexual harassment policies and procedures, the inmates right to be free from sexual abuse and sexual harassment, the right of the inmate to be free from retaliation for reporting sexual abuse or sexual harassment, the dynamics of sexual abuse and sexual harassment in a confinement setting, the common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationship with inmates, how to communicate effectively and professionally with lesbian, gay, bisexual, transgender and intersex inmates and how to comply with relevant laws related to mandatory reporting. All fifteen random staff interviewed report receiving this training. All staff were able to provide examples of information covered in the annual PREA Training. These examples include reporting requirements, dynamics sexual abuse and harassment in confinement settings, responding to incidents of sexual abuse, and respectful interaction with lesbian, gay, bisexual, transgender, and intersex inmates. A review of a sample of all staff training records indicated that 100% of those reviewed received PREA training. This auditor also met with the Employee Development Manager who reviewed training with this auditor and provided all employee training records regarding PREA. FCI McKean is compliant with this provision of the standard.

115.31 (b)

P.S. 5324.12 states that the annual refresher training takes into consideration the gender of the inmate population at each facility. A review of the training curriculum confirmed that the annual training includes information on male and female inmates. FCI McKean only houses male inmates. The fifteen random staff interviewed stated that the training did include information on female and male inmates, but more focus was placed on males due to the facility population. This auditor finds FCI McKean to be in compliance with the requirements of this provision.

115.31 (c)

As per the PAQ and further evidenced by review of staff training records and random staff interviews, all 227 staff employed by FCI McKean have been trained in PREA requirements and training is provided annually. P.S. 5324.12 states that new employees receive the Sexually Abusive Behavior Prevention and Intervention Program training and that current employees receive the refresher training as part of their annual training. The Employee Development Manager provided this auditor with training records indicating that the refresher training was completed by all current staff as part of annual retention training. FCI McKean meets the requirements of this provision of the standard.

115.31 (d)

	<p>P.S. 5324.12 states that all staff are required to physically sign or electronically acknowledge that they received and understood the PREA training. A review of the training records indicate that all staff sign a training acknowledgement that states that they have received and understand the training conducted regarding the agency's sexual abuse and sexual harassment policies and procedures. This is evidenced by a review of training records. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean exceeds compliance with all provisions of this standard. Training is conducted annually in person and via a computer-based training module and via emails and in-person via lieutenants throughout the year. All fifteen random staff interviewed were knowledgeable in PREA and touched on the variety of training they receive on the topic throughout the year. FCI McKean clearly exceeds the staff training requirement based on interviews with random staff and the Employee Development Manager, and documentation of such training.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.32 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all volunteers and contractors who have contact with inmates are to be trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Twenty-two volunteers and individual contractors who have contact with inmates have been trained in agency policies and procedures regarding sexual abuse and harassment prevention, detection, and response as per PREA Compliance Manager (PCM) who reviewed numbers with this auditor on-site. This auditor reviewed training records confirming all volunteers have received training and the training lesson plan was reviewed. Two contractors were interviewed who reported that they received training on their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. The two contractors report watching videos and reading information provided as part of their training. The PCM is responsible for ensuring all the contractors and volunteers are trained. FCI McKean is compliant with this provision of the standard.</p> <p>115.32 (b)</p> <p>P.S. 5324.12 states that volunteers and contractors who have contact with inmates must be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This auditor reviewed the training and find that it includes all requirements of this standard. Two contractors were interviewed and explained how they would respond to sexual abuse</p>

	<p>and sexual harassment, and both noted their awareness of the facility's zero tolerance policy. FCI McKean is compliant with this provision of the standard.</p> <p>115.32 (c)</p> <p>P.S. 5324.12 states that the BOP will maintain documentation confirming that volunteers and contractors understand the training received. P.S. 5324.12 further states that participation must be documented through volunteer and contractor signature or electronic verification and will indicate that the volunteer and contractor understood the training they have received. At the conclusion of the training, volunteers and contractors are asked to seek additional direction from Bureau staff, if necessary, to ensure understanding of the training. This auditor reviewed training records with signatures of completion for contractors and volunteers. FCI McKean meets the requirement of this provision.</p> <p>FCI McKean is complaint with all provisions of this standard.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.33 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program outlines the requirement for inmates to receive PREA education, specifically stating that inmates receive information on the agencies zero tolerance policy and how to report incidents or suspicion of sexual abuse or sexual harassment via the Admissions and Orientation Pamphlet on Sexually Abusive Behavior Prevention and Intervention. FCI McKean's Institution Admission and Orientation Handbook also contains information on sexually abusive behavior prevention and intervention. This was provided to this auditor in both English and Spanish. The institution supplement MCK 5324.12e states that psychology is responsible for ensuring that a presentation describing the Sexually Abusive Behavior Prevention and Intervention Program is provided during A&O. MCK 5324.12e further states that at a minimum, the presentation will include information about PREA, and sexually abusive behavior, including its recognition, methods of self-protection, and means of reporting, intervention and treatment. The presentation must be followed by a question and answer session. As per the PAQ, 957 inmates were admitted in the last twelve months and were given the aforementioned information at intake. Twenty random inmates were interviewed on-site, eighteen reported that they received information regarding the facility's rules against sexual abuse and sexual harassment at intake. The inmates interviewed referenced the pamphlet and the handbook. Two intake staff were interviewed and both report that inmates are provided with information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. Both reported that they ensure that the inmates have been educated on</p>

the zero-tolerance policy by having the inmate sign that they received the information. The intake staff also noted that they receive the information again at Admission and Orientation (A&O) with their unit team and the information is also posted on bulletin boards in the housing units. This auditor did observe such postings when touring the facility. FCI McKean is compliant with this provision of the standard.

115.33 (b)

P.S. 5324.12 outlines the requirement for inmates to receive PREA education, specifically the comprehensive education that is provided to the inmates. P.S. 5324.12 indicates that during the A&O program, a designated staff member will present the Sexually Abusive Behavior Prevention and Intervention Program Inmate Education. As per the PAQ 842 inmates whose length of stay was thirty days or more at the facility received the comprehensive PREA education at A&O. At FCI McKean the Unit Team, which consists of the Unit Manager and Case Managers assigned to the housing unit, conducts the A&O program. As per the two intake staff interviewed inmates are provided information at intake and again at A&O within 28 days of admission. As per the intake staff the Case Management Coordinator ensures all inmates receive A&O. Eighteen of the twenty random inmates interviewed report receiving comprehensive PREA education which includes their right to be free from being sexually abused and sexually harassed, how to report such incidents, and their right to not be punished or retaliated against for reporting such incidents. FCI McKean is compliant with this provision of the standard.

115.33 (c)

P.S. 5324.12 states that the agency requires that all inmates who are transferred from one facility to another be educated regarding their rights under PREA to the extent that the policies and procedures of the new facility differ from those of the previous facility. As per the intake staff interviewed, all inmates receive PREA information regarding their rights to be free from sexual abuse and sexual harassment, how to report, and their right to be free from retaliation for reporting at the time of intake. Within 28 days the inmates have A&O which provides additional comprehensive PREA education. As per eighteen of the twenty random inmates interviewed, they are provided with PREA education more than once, starting immediately at admissions. This auditor finds that FCI McKean is compliant with this provision of the standard.

115.33 (d)

BOP P.S. 5324.12 establishes guidelines to providing disabled inmates and LEP inmates an equal opportunity to benefit from all the aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. As per the FCI McKean institution supplement MCK 5324.12e and P.S. 5324.12, the PREA Compliance Manager (PCM) will take appropriate steps to ensure that inmates with disabilities or with limited English proficiency are provided with effective communication accommodation through local interpretation services. A language line is available, which was tested by this auditor and is valid. MCK 5324.12e further states that each inmate is provided with the A&O pamphlet on Sexually Abusive Behavior Prevention.

	<p>MCK 5324.12e states that the Case Management Coordinator and the Supervisory Correctional Systems Supervisor will identify inmates who have disabilities that prevent them from reading or understanding the pamphlet and will notify the unit team so appropriate accommodations are made. This auditor was provided with PREA information in both English and Spanish and signage was observed throughout the facility in both English and Spanish. FCI McKean is compliant with this provision of the standard.</p> <p>115.33 (e)</p> <p>P.S. 5290.14, Admission and Orientation Program, indicates that inmates are required to sign a copy of the Admission & Orientation brochure at intake and that the original is placed in the inmates' central file. Additionally, the education is documented on the Institution Admission & Orientation Program Checklist. This auditor was provided with twenty-nine inmate A&O checklists verifying that Sexual Abuse/Assault Prevention and Intervention was completed. FCI McKean is compliant with this provision of the standard.</p> <p>115.33 (f)</p> <p>As per BOP P.S.5324.12 the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. P.S. 5324.12 outlines what should be posted in each housing unit including the zero-tolerance policy poster and contact information for reporting sexual abuse allegations. This auditor observed such information posted throughout the facility in both English and Spanish. FCI McKean is compliant with all provisions of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.34 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that investigators are required to be trained in conducting sexual abuse investigations in a confinement setting. This training is completed through two curriculums: the DOJ/OIG PREA Training or the NIC: Investigating Sexual Abuse in a Confinement Setting. Two investigative staff were interviewed on-site and both report that they received specialized training specific to conducting sexual abuse investigations in confinement settings. Both individuals interviewed stated that the training was computer based and was developed by the National Institute of Corrections (NIC). FCI McKean is compliant with this provision of the standard.</p>

	<p>115.34 (b)</p> <p>As per the two investigative staff interviewed the specialized training consisted of 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 or prosecution referral. The NIC training is compliant with this provision of the standard.</p> <p>115.34 (c)</p> <p>P.S. 5324.12 documentation that investigators have completed the required specialized training in conducting sexual abuse investigations must be maintained. As per the PAQ there are thirteen trained PREA investigators at FCI McKean. This auditor was provided with training records indicating that thirteen individuals completed the PREA Investigating Sexual Abuse in a Confinement Setting training developed by the NIC. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.35 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all full-time and part-time medical and mental health care practitioners who work regularly in BOP facilities must be trained in 1) how to detect and assess signs of sexual abuse and sexual harassment. 2) How to preserve physical evidence of sexual abuse. 3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment and 4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. P.S. 5324.12 further states that the Health Services Division must ensure that medical staff are appropriately trained under the requirements of this standard and the Reentry Services Division is required to ensure that mental health staff are appropriately trained under this standard. Two medical and two mental health staff were interviewed on-site. As per the PAQ, there are 23 medical and mental health care practitioners who work at FCI McKean regularly and all have received specialized medical and mental health PREA training. Two medical and mental health staff were interviewed and report receiving specialized training regarding sexual abuse and sexual harassment that covered how to detect signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations or suspicions of sexual abuse and</p>

	<p>sexual harassment. FCI McKean is compliant with this provision of the standard.</p> <p>115.35 (b)</p> <p>As per the two medical and mental health staff interviewed, the PAQ, and the PREA Compliance Manager all forensic examinations are done at the local hospital. This provision is not applicable to FCI McKean.</p> <p>115.35 (c)</p> <p>As per P.S. 5324.12, the BOP maintains documentation that medical and mental health practitioners have received the training referenced in this standard. This auditor received the training log indicating that all 23 medical and mental health care staff received the PREA for Medical and Mental Health Care training. FCI McKean is compliant with this provision of the standard.</p> <p>115.35 (d)</p> <p>As per P.S. 5324.12, medical and mental health care practitioners employed by the BOP also have to complete the mandatory training for PREA that all other employees receive. Contracted and volunteer medical and mental health staff must also complete the volunteer and contractor training provided to all other volunteers and contractors. This auditor reviewed records indicating all staff employed by FCI McKean and all contracted medical staff have received the PREA training provided to all other staff with the same level of inmate contact. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.41 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. P.S. 5324.12 further states that all inmates entering an institution are screened as directed by Health Services, Psychology Services and Unit Management policies. For inmates with a history of sexual victimization while in BOP custody a referral shall be sent to psychology services and if not previously documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's report of victimization to ensure the appropriate steps have been taken. If inmates report a history of sexual victimization while in a non-BOP setting, staff must document the information and appropriate psychological treatment and</p>

monitoring will be provided if needed. Inmates with a history of sexual predation shall be referred to psychology services when identified. If incidents of sexual predation have not previously been documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's history of predation to ensure that appropriate steps have been taken. The Chief of Correctional Services will also update the SENTRY STG assignments regarding predation and victimization. The FCI McKean institution supplement MCK 5324.12e states that Unit Managers are responsible for ensuring that a qualified Unit Team member completed the PREA Intake Objective Screening Instrument. As per the two staff interviewed who are responsible for risk screening, inmates are screened upon admission by a case manager, and again in 28 days with the case manager assigned to their unit. Twelve random inmates interviewed were at the facility for less than twelve months, eleven recall being asked questions from the PREA risk screening tool. This auditor received and reviewed a sampling of nineteen inmate intake screening forms. FCI McKean is compliant with this provision of the standard.

115.41 (b)

P.S. 5324.12 and MCK 5324.12e states that PREA risk screenings are to be completed within 72 hours of intake. As per the two staff who perform risk screenings, the initial screening occurs immediately upon intake. The PAQ indicates that 899 inmates whose length of stay exceeded 72 hours entered the facility in the last twelve months and all were screened for risk of sexual victimization or risk of sexual abusiveness. FCI McKean is compliant with this provision of the standard.

115.41 (c)

P.S. 5324.12 the assessment shall be conducted using an objective screening instrument. A memo from the Warden dated September 8, 2023, states that FCI McKean utilizes the PREA Intake Objective Screening Instrument. The memo further states that inmates are screened by Unit Team staff and if risk factors are identified at intake inmates are referred to Psychology Services for further initial assessment of risk of sexual victimization or abusiveness. The memo also notes that the reassessment of risk occurs at Unit Team progress reviews. This auditor reviewed the risk assessment tool and find it to be objective. FCI McKean is compliant with this provision of the standard.

115.41 (d)

P.S. 5324.12, the intake screening shall consider, at a minimum, the following criteria, 1) whether the inmate has a mental, physical, or developmental disability, 2) age, 3) physical build, 4) previous incarceration history, 5) criminal history, 6) prior convictions for sex offenses, 7) perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, 8) previous sexual victimization, 9) inmate's own perception of vulnerability, and 10) whether the inmate is detained solely for civil immigration purposes. This auditor reviewed the intake risk screening form and found it to be compliant with all requirements of this provision. As per both risk screening staff interviewed the risk screening tool considers all the requirements of this provision. FCI McKean is compliant with this provision of the standard.

115.41 (e)

BOP P.S. 5324.12 states that the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing inmates for risk of being sexually abusive. MCK 5324.12e states that when completing the PREA Intake Objective Screening Instrument the Unit Team should not rely solely on the inmate's self-report, but should also review background information and other available information. As per both risk screening staff interviewed the initial risk screening considers sexual orientation, self-perception of vulnerability, sexual abuse history, criminal history, age, current conviction, and physical build and appearance. As per the risk screening staff the process for the screening is that they sit with the inmate and go through the intake paperwork and the initial screening is conducted, if there are issues identified in the screening the inmates are sent to psychology for follow-up. At the 28 day follow up the case manager sits with the inmate and goes over the PSI, Judgement and Commitment, Initial Scoring, PREA Screening, and Screening for Risk (i.e. gang affiliation, disabilities). FCI McKean is compliant with this provision of the standard.

115.41 (f)

P.S.5324.12 states that inmates would be reassessed for the inmate's risk of victimization or abusiveness within 30 days from their arrival at the facility by Psychology Services staff. The PAQ indicates that 842 inmates within the last twelve months were at the facility for longer than thirty days and were reassessed within that time frame. As per both risk screening staff inmates are assessed upon intake into the facility and again within 28 days of arrival at the facility. As per the twelve random inmates interviewed that were at FCI McKean for under twelve months, five recall being reassessed for risk, two were only at the facility for one to three weeks, and four cannot recall if they were ever reassessed. All twelve recall meeting with their case manager after being at the facility a few weeks. This auditor discussed the re-assessment of risk screening and how it is conducted with the risk screening staff interviewed. The staff reassess this by reviewing the screening tool with the inmate and ensuring there are no changes. This auditor received a sample of seven inmate reassessments as part of their Individualized Needs Plan. FCI McKean is compliant with this provision of the standard.

115.41(g)

P.S. 5324.12, states that inmates will be reassessed for their risk of victimization or abusiveness when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on their risk of sexual victimization or abusiveness. This reassessment would be completed by Psychology Services staff. Both risk screening staff reported that they reassess within 28 days after arrival at the facility and if asked to reassess again by the PREA Compliance Manager (PCM). FCI McKean is compliant with this provision of the standard.

115.41 (h)

P.S. 5324.12 states that inmates are not to be disciplined for refusing to answer the

following questions during the risk screening: whether or not the inmate has a mental, physical or developmental disability; whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; whether or not the inmate previously experienced sexual victimization and the inmate's own perception of vulnerability. Both staff interviewed who are responsible for conducting risk screening reported that inmates are never disciplined for refusing to respond to screening questions. Both staff report that it is entirely voluntary. FCI McKean is compliant with this provision of the standard.

115.41 (i)

P.S. 5324.12 states that the agency has implemented appropriate controls on the dissemination of the screening information to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. That information is disseminated on a need-to-know basis for staff. As per the PREA Coordinator risk screening information is limited to staff who have a need to know. The PREA Coordinator further explained that this can vary depending on what is recommended within the risk assessment. The PCM and two staff interviewed responsible for conducting risk screening stated that psychology, the unit team, and sometimes when there are security concerns or for investigative purposes the SIS may have access to the risk assessment. The risk assessment risk level for victim or perpetrator shows up as a "v" or a "p" in the inmate management system to ensure potential victims are not housed in the same cell as potential perpetrators. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.42 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that information from the risk screening will be utilized 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. As per P.S. 5324.12 once an inmate has been identified as a victim or perpetrator, or as "at risk" for victimization or perpetration, unit management should review classification options. As per a memo dated September 8, 2023 from the Warden, if an inmate is determined to be at elevated risk of sexual victimization and or sexual perpetration by Psychology Services, notification is provided to the Unit Team staff via email, then the Unit Team will consider this information when determining housing, bed, work, education, and program assignments. The memo further states that transgender and intersex inmates' assignments are reviewed on a</p>

case-by-case basis. A second memo was provided to this auditor referencing this provision of the standard dated September 8, 2023 from the Warden stating that PREA concerns are discussed weekly including on-going cases, concerns regarding transgender inmates, and other PREA related concerns. This auditor was provided a copy of the September 21, 2023 Weekly Segregation Meeting/PREA Meeting attendance sheet. The FCI McKean institution supplement MCK 5324.12e outlines the process for identifying inmates as potential victims or potential perpetrators. As per the PREA Compliance Manager (PCM) risk screening information is used to make sure inmates who are identified as potential victims are not housed with potential predators. The PCM further stated that the information from the wrist screening is utilized to determine not only housing but programming and work assignments. As per the PCM the information from the wrist screening is provided to the unit team, psychology and the captains and lieutenants as needed. Two staff who are responsible for conducting risk screening we're interviewed and stated that the facility utilizes the information obtained by the risk screening to determine appropriate housing and programming for inmates. FCI McKean is compliant with this provision of the standard.

115.42 (b)

P.S. 5324.12 states that the agency shall make individualized determinations about how to ensure the safety of each inmate. As per the two staff interviewed who are responsible for performing the risk screening, information obtained by the screening is utilized by the facility to determine appropriate housing and programming for inmates to ensure safety. FCI McKean is compliant with this provision of the standard.

115.42 (c)

P.S. 5324.12 states that 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 agency shall consider on a case-by-case basis whether a placement would ensure the inmates health and safety, and whether the placement would present management or security problems. As per the PCM the facility determines housing and program assignments for transgender or intersex inmates on an individual basis and considers whether the placement will ensure the inmates health and safety as well as whether the placement would present a management or security problem. Five transgender inmates were interviewed and four report being asked about their perception of their own safety when they disclosed their status. All five report not being housed in housing areas designated for transgender or intersex inmates and all five stated they were never strip-searched with the sole purpose of identifying their genital status. FCI McKean is compliant with this provision of the standard.

115.42 (d)

As per P.S. 5324.12, placement and programming assignments for each transgender intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. This auditor was provided a sample of two

Individualized Needs Plans for transgender inmates. As per the PCM and the two staff who perform the risk screening, placement and program assignments for each transgender and intersex inmate are assessed by the Unit Team initially at 30 days, and then every six months after, until the year of their release when a review will be done monthly. FCI McKean is compliant with this provision of the standard.

115.42 (e)

P.S. 5324.12 states that a transgender or intersex inmates own views with respect to his or her own safety will be given serious consideration. As per the PCM and the two staff who perform risk screenings, transgender and intersex inmate’s views of their own safety are taken into consideration when determining housing and program assignments. Four of the five transgender inmates interviewed stated that their views for their own safety were considered. FCI McKean is compliant with this provision of the standard.

115.42 (f)

P.S. 5324.12 states that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. As per the five transgender inmates interviewed, the PCM, and the two staff responsible for performing risk screening, all showers are singles therefore showering in groups is not prohibited for any inmate. All transgender inmates can shower separately. This auditor observed the showers in every housing unit and confirmed that each shower is a single and all inmates shower separately. FCI McKean is compliant with this provision of the standard.

115.42 (g)

P.S. 5324.12 states that lesbian, gay, bisexual, transgender, or intersex inmates shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. As per the PCM and the PREA Coordinator, there are no dedicated housing units for lesbian, gay, bisexual, transgender, and intersex inmates. All five transgender and one gay inmate interviewed report that they have never been housed in a unit solely for LGBTI inmates. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.43 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that 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 other available alternative means of separation from likely abusers. P. S. 5324.12, further states that if the facility cannot conduct such an assessment immediately it may not hold the inmate in involuntary segregated housing for more than 24 hours. As per the PAQ no inmates were held in involuntary segregated housing awaiting completion of risk assessment in the last twelve months. As per the Warden, the agency has a policy prohibiting placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from potential abusers. The warden further stated that the facility tries to avoid placing inmates at risk or who have alleged abuse in segregated housing. However, if they are placed in segregated housing it is documented. This documentation is maintained by the SIS and the Warden reviews if there are any issues. FCI McKean is compliant with this provision of the standard.

115.43 (b)

P.S. 5324.12 states that when an inmate is placed in special housing involuntarily, access to programs, privileges, education, or work should not be interrupted, to the extent possible. P.S. 5324.12, further states that if there are limitations documentation must reflect the limitation, duration, and rationale for the limitation. The staff member interviewed who supervises segregated inmates stated that inmates housed in segregation due to risk of sexual abuse or after having alleged sexual abuse, are not restricted from accessing programs, privileges, education, and work opportunities. The staff member further stated that if these things are restricted it is documented. FCI McKean is compliant with this provision of the standard.

115.43 (c)

P.S. 5324.12 states that the facility shall assign 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. As per the PAQ there were no inmates held in involuntary segregation longer than 30 days while awaiting alternative placement. As per the Warden, inmates at high risk for sexual victimization or who have alleged sexual abuse are only housed in segregated housing involuntarily until a means of separation from likely abusers is arranged. As per the Warden the time frame for how long inmates can be kept in involuntary segregation would depend on the individualized case and investigation. The Warden noted that there have been no occurrences of this in the last twelve months. The segregated housing staff interviewed never experienced having an inmate housed in segregated housing but if they had to house someone there for this reason, it would be until the case cleared. The segregated housing unit staff interviewed reported that inmates often will voluntarily request to be in segregated

	<p>housing for their safety. Some informal interviews with staff in the segregated housing unit stated that same thing regarding the requests for voluntary segregation for many reasons including PREA concerns. FCI McKean is compliant with this provision of the standard.</p> <p>115.43 (d)</p> <p>P.S. 5324.12 states that States that if an involuntary segregated housing assignment is made the facility shall clearly document the basis for the facilities concern for the inmate safety and the reason why no alternative means of separation can be arranged. P. S. 5324.12, states that when determining an appropriate method of safeguarding the inmate assigned at risk for victimization, the Warden ensures all options are considered by completing, signing, and dating form BP - A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation. FCI McKean is compliant with this provision of the standard.</p> <p>115.43 (e)</p> <p>P.S. 5324.12 states that the inmate’s status is reviewed weekly during Special Housing Unit Meetings. A memo dated September 3, 2023 from the Warden states that there have been no instances of inmates being placed in Special Housing for protective custody for being at high risk of victimization. The segregated housing staff interviewed stated that weekly there is a Special Housing Unit (SHU) meeting in which all the inmates housed in SHU are discussed. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.51 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program reviews the various internal ways for inmates to privately report sexual abuse and harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. P.S. 5324.12 states that Bureau inmates are encouraged to report allegations to staff at all levels and are also provided with avenues of internal reporting such as telephonically to specific departments or by mail to an outside entity. The ways for inmates to report sexual abuse or sexual harassment is also in the Inmate Admission and Orientation Handbook for FCI</p>

McKean, which this auditor reviewed. While on-site this auditor saw signage indicating various methods of reporting to include telling a staff member, filing an Administrative Remedy, electronic messaging to staff or the Department of Justice Sexual Abuse Reporting Mailbox, or in writing to the Office of the Inspector General. As per the fifteen random staff interviewed and the twenty random inmates interviewed, inmates can privately report sexual abuse and sexual harassment, retaliation by inmates or staff for reporting sexual abuse or sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment. As per the staff interviewed, inmates can write a cop-out, ask to speak to staff privately, email on TRULINCS any department or official. FCI McKean is compliant with this provision of the standard.

115.51 (b)

P.S. 5324.12 states that at least one way for inmates to report abuse or 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 agency officials and allows the inmate to remain anonymous upon request shall be provided. P.S. 5324.12 indicates that inmates are provided contact information and access to the Office of the Inspector General to make reports. The signage throughout the facility provides the address for the Office of the Inspector General as does the Inmate Orientation and Admission Handbook. A memo provided by the Warden, dated September 8, 2023 states that the Office of the Inspector General is responsible for taking outside reports of sexually abusive behavior. As per the fifteen random staff interviewed, inmates can report incidents of sexual abuse or sexual harassment verbally, in writing, anonymously, and from third parties. As per the staff interviewed, all reports of sexual abuse and sexual harassment are investigated immediately upon receiving the allegation. The PREA Compliance Manager notes the various ways for inmates to report and noted that she believes there are reporting methods which can be made anonymously. Of the twenty random inmates interviewed, all report that they are able to report incidents of sexual harassment and sexual abuse to a public or private entity or office that is not part of the agency through U.S. Mail, the phone, or through email. Of the twenty inmates interviewed, fourteen were aware that they could report anonymously and the other six were not sure but referenced signs. FCI McKean is compliant with the provision of this standard.

115.51 (c)

P.S. 5324.12 states that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. The FCI McKean Admissions and Orientation Inmate Handbook also outlines the ways in which inmates can report sexual abuse and sexual harassment. A memo provided by the Warden dated September 8, 2023 states that staff are mandated to accept all reports of sexual assault and sexual harassment made verbally, in writing, and anonymously, and from third parties. All twenty random inmates interviewed, and all fifteen random staff interviewed report that inmates are able to make reports of sexual abuse and sexual harassment in writing, verbally, or through a third party such

	<p>as a family member or another inmate. FCI McKean is compliant with this provision of the standard.</p> <p>115.51 (d)</p> <p>P.S. 5324.12 states that staff may contact any supervisory staff at the local institution, regional staff, or Central Office staff, including the Regional PREA Coordinators and the National PREA Coordinator. P.S. 5324.12 further states that allegations involving staff members may also be reported to the Office of Internal Affairs or the office of the Inspector General. P.S. 3420.11, Standard of Employee Conduct states that staff must report and a failure to do so could result in disciplinary action up to and including removal. Fifteen random staff interviewed reported that they can privately report sexual abuse and sexual harassment of inmates. Some methods of reporting noted would be notifying SIS, Warden, or their immediate supervisor. FCI McKean is compliant with the requirement of this provision.</p> <p>This auditor finds FCI McKean to be in compliance with all provisions of this standard.</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.52 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program references P.S. 1330.18, Administrative Remedy Program for this standard. 1330.18 outlines the Administrative Remedy Program, indicating that FCI McKean is not exempt from this standard.</p> <p>115.52 (b)</p> <p>P.S. 1330.18 describes the grievance process for allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that the agency does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse and that the agency does not require an inmate to use the informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. Based on the policy review FCI McKean is compliant with this requirement of the provision.</p> <p>115.52 (c)</p> <p>P.S.1330.18 states that the agency will ensure that an inmate who alleges sexual</p>

abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint. The FCI McKean Admission and Orientation Handbook and the Sexually Abusive Behavior Prevention and Intervention handout for inmates was reviewed by this auditor. Both note that you can report an incident of sexual abuse through the Administrative Remedy process. FCI McKean is compliant with this provision of the standard.

115.52 (d)

P.S. 1330.18 outlines the grievance process for allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that that the agency would issue a final decision on grievances related to sexual abuse within 90 days of the initial filing. The 90 days does not include the time used by the inmate to prepare any administrative appeal. The agency may claim an extension up to 70 days if the normal time period for response is insufficient to make an appropriate decision. The inmate must be notified in writing of the extension and provided a date by which the decision will be made. P.S. 1330.18 also indicates that if the inmate does not receive a response within the allotted timeframe, the inmate will consider the absence of a response to be a denial.

This auditor received a memo from the Warden dated September 8, 2023, stating that there were three administrative remedies filed during the audit year that were related to sexually abusive behavior and all three were addressed within the 90 day window and did not require an extension. The PAQ also notes three administrative remedies were filed alleging sexual abuse, all three were remedied within 90 days, and none requires an extension. Four inmates who reported sexual abuse at the facility were interviewed. Three reported that they were notified in writing of the decision regarding their report, none of them reported that it took longer than 90 days to receive the notification. This auditor finds that FCI McKean is compliant with this provision of the standard.

115.52 (e)

P.S. 1330.18, outlines the grievance process for third party allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that third parties are permitted to assist inmates in filing requests for administrative remedies for sexual abuse and are permitted to file such requests on behalf of the inmate. In addition, it states that if a third-party files a report on behalf of an inmate that the agency may require the alleged victim to agree with the request prior to filing and if the inmate declines the agency will require the inmate to complete a sworn affidavit stating he does not want the grievance to proceed. The PAQ reports that there were no grievances alleging sexual abuse filed by inmates in the past twelve months. FCI McKean meets the requirements of this provision of the standard.

115.52 (f)

P.S. 1330.18 states that the agency provides inmates the opportunity to file an emergency grievance alleging substantial risk of imminent sexual abuse and the grievance will be addressed immediately. P.S. 1330.18 indicates that that an initial response will be provided within 48 hours and that a final decision will be made within

	<p>five calendar days. The final decision will document the agency’s determination whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The PAQ states that there were no emergency grievances filed in the last twelve months alleging substantial risk of imminent sexual abuse. FCI McKean meets the requirement of this provision of the standard.</p> <p>115.52 (g)</p> <p>P.S. 1330.18 states that inmates may be disciplined for filing a grievance in bad faith. The PAQ indicated that no inmates were disciplined in the last twelve months for filing a grievance in bad faith regarding sexual abuse. FCI McKean meets the requirements for this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.53 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates shall be provided with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers. P.S. 5324.12 further states that the facility shall enable reasonable communication between the inmates and these organizations and agencies, and as confidential manner as possible. As per P.S. 5324.12, the PREA Compliance Manager, with the assistance of psychology services staff, seeks to establish an agreement with community service providers who can provide confidential emotional support services as it relates to sexual abuse. If an agreement is not feasible the attempts to form such a relationship must be documented. The FCI McKean Inmate Handbook contains information on counseling programs for victims of sexually abusive behavior. The information for contacting psychology and the address and telephone number for YWCA Bradford. The institution supplement MCK 5324.12e also provides the contact information for YWCA Bradford and the Pennsylvania Coalition Against Rape (PCAR). Of the twenty random inmates interviewed, eleven were aware of services available outside the facility for dealing with sexual abuse if needed. The inmates referenced the signage throughout the facility, over the telephones on the housing units, and the information in the handbook. The inmates stated that the services were advocacy, counseling, psychology related, and supportive. This auditor also observed the signage on the housing units and above the telephones on the housing units. Of the four inmates who reported sexual abuse two were provided information on supportive services, one said it was not applicable to him, and the other stated that he was not provided</p>

	<p>information but knew where it was. FCI McKean is compliant with this provision of the standard.</p> <p>115.53 (b)</p> <p>P.S. 5324.12 states that inmates shall be informed prior to giving them access, the extent of which such communications will be monitored and the extent in which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Of the eleven of the twenty random inmates who were aware of the emotional support services, seven were aware that the services were confidential, four were not sure as they never looked into using them. The four inmates who reported sexual abuse who were interviewed were not certain if the services were confidential and stated they did not utilize the services. The inmates seemed to be aware of the services, but being they did not utilize them, they were unaware of the limitations of them. FCI McKean is compliant with this provision of the standard.</p> <p>115.53 (c)</p> <p>P.S. 5324.12 states that the agency shall maintain our attempt to enter into MOUs or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. This auditor was provided with a copy of the agreement between FCI McKean and YWCA Bradford. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.54 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency 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 Bureau posts this publicly on their website under a "Contact Us" tab. Third parties can submit concerns in writing on behalf of an inmate. This auditor also was provided with and observed while on-site postings on each housing unit stating the different reporting methods including the address for the Office of the Inspector General (OIG). These postings are also available to the public in the lobby and visitation area. FCI McKean is compliant with all provisions of this standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.61 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all staff are required to report immediately and according to policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, 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. P.S. 5324.12 further outlines this process. As per P.S. 5324.12 all staff must report the information concerning incidents or possible incidents of sexual abuse or sexual harassment to the Operations Lieutenant. Staff will then provide a written follow-up memorandum to the Operations Lieutenant to document the report. The Operations Lieutenant will notify the PREA compliance manager. The PREA Compliance Manager will determine whether a full response protocol is needed. All random staff interviewed reported that they are required to report all knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility, as well as retaliation for reporting, and staff neglect or violation of responsibilities that may have led to abuse or retaliation. All fifteen random staff interviewed stated that once the inmates were separated and the scene secure, notification would be made to the lieutenant and then the staff would be required to write a report. FCI McKean is compliant with this provision of the standard.</p> <p>115.61 (b)</p> <p>P.S. 5324.12 states that the information concerning the identity of the alleged inmate victim and the specific facts of the case are limited to the staff who need to know because of their involvement with the victim's welfare and the investigation of the incident. All fifteen staff interviewed reported they would notify the lieutenant and then document the incident in a report. Afterward they are not involved with the investigation unless requested by the lieutenant. Informal interviews with staff indicate that investigations at the facility are not discussed amongst staff, the information is kept with SIS. FCI McKean is complaint with this provision of the standard.</p> <p>115.61 (c)</p> <p>P.S. 5324.12 states that medical and mental health practitioners are required to report sexual abuse and are further required to inform inmates of their duty to report and the limitations of confidentiality at the initiation of services. Two medical and mental health staff were interviewed on-site. Both reported that they explain their limitations of confidentiality and their duty to report at the initiation of services for mental health and all inmates are notified of medical's limitations to confidentiality and duty to report at intake. Both medical and mental health staff interviewed report</p>

that they are required to report any knowledge, suspicion, or information regarding incidents of sexual abuse or sexual harassment to the lieutenant. One medical staff interviewed reported that an incident was reported to her and she stayed with the inmate to ensure safety and notified the lieutenant. FCI McKean is compliant with this provision of the standard.

115.61 (d)

P.S. 5324.12 states that if the alleged victim is under the age of 18 or considered a vulnerable adult under state or local vulnerable persons statute, the allegation shall be reported to the designated state or local Services Agency under applicable mandatory reporting laws. As per the Warden and the PREA Coordinator, if an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law, the institution staff would report the allegation to the designated state or local services agencies under the applicable mandatory reporting laws. FCI McKean currently only housed adult males. FCI McKean is compliant with this provision of the standard.

115.61 (e)

P.S. 5324.12 states that all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, shall be reported to the facilities designated investigators. P.S. 5324.12 further states that staff must report and respond to allegations of sexually abusive behavior regardless of the source of the report. As per the Warden, all allegations of sexual abuse and sexual harassment are reported directly to designated facility investigators and all investigations are completed in their entirety regardless of how the report was made and regardless of whether the inmates and staff involved are still employed or housed at the facility. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that when an inmate is subject to substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. P.S. 5324.12 further outlines the response as such, when inmate-on-inmate sexual abuse the Operations Lieutenant is notified immediately and safeguards the inmate, referrals are made to Psychology Services for assessment and the PREA Compliance Manager is notified. If it is a staff-on-inmate sexual abuse allegation, the inmate shall be safeguarded which could include a reassignment of staff. If it is an inmate-on-staff sexual abuse allegation</p>

	<p>with the staff member being the alleged victim, all options for safeguarding the staff member will be considered. A memo from the Warden, dated September 8, 2023 states that in the last twelve months, there have not been any cases where the facility learned the inmate was subject to substantial risk of imminent abuse to the extent that immediate action needed to be taken to employ protective measures.</p> <p>The agency head stated that the facility is to immediately safeguard the alleged victim by separating him/her from the potential danger. Actions vary depending on the severity of the threat. If the possible threat is by another inmate, a change may be made to the inmate’s housing assignment, work assignment, or possible placement in the Special Housing Unit. If the possible threat is from a staff member, other options exist in addition to these, to include a change in the staff member’s work assignment or removal from the facility while the investigation is conducted. As per the Warden, when it is learned that an inmate is subject to substantial risk of imminent sexual abuse the facility is to separate and safeguard the inmate. All fifteen random staff interviewed stated that they would immediately separate the inmate from the alleged abuser if they learned that an inmate was at risk of imminent sexual abuse. FCI McKean is compliant with all provisions of this standard.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.63 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that upon receiving an allegation that an inmate was sexually abused while confined at another facility the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. P.S. 5324.12 further states that in cases where there is an allegation that sexually abusive behavior occurred at another Bureau facility, the Warden of the victim’s current facility reports the allegation to the Warden of the identified institution. In cases alleging sexual abuse by staff at another institution, the Warden of the inmate’s current facility refers the matter directly to the Office of Internal Affairs (OIA). For non-Bureau secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers, the Warden will contact the appropriate office of the facility and notify the privatization management or the residential reentry management branches as appropriate. For non-Bureau facilities the Warden contacts the appropriate office of that correctional agency. As per the PAQ and a memo from the Warden dated November 8, 2023, there were two allegations received in the last twelve months that an inmate was abused while confined at another facility, in both cases the SIS interviewed the inmates and made notification to the other institutions within 72 hours. FCI McKean is compliant with this provision of the standard.</p> <p>115.63 (b)</p>

	<p>P.S. 5324.12 states that notifications outlined in provision a. of this standard are to be made as soon as possible, no later than 72 hours after receiving the allegation. This auditor reviewed documentation on site indicating that the notification was sent to the facility within 72 hours. As per a memo dated November 8, 2023 from the Warden, both notifications were made within 72 hours. FCI McKean is compliant with this provision of the standard.</p> <p>115.63 (c)</p> <p>P.S. 5324.12 states that notifications provided to other institutions must be documented. This auditor reviewed the files of the two reported incidents which occurred at another facility. FCI McKean is compliant with this provision of the standard.</p> <p>115.63 (d)</p> <p>P.S. 5324.12 states that the facility head or agency office that receives notifications that an alleged sexual abuse occurred in the facility must ensure that the allegation is investigated appropriately. As per the PAQ and a memo from the Warden dated November 8, 2023, there was one allegation of sexual abuse the facility received from another facility. As per the agency head, reports from other institutions are sent to the Warden or they can contact the BOP National PREA Coordinator if they need direction on who to contact. As per the agency head, once the Warden receives the report of the allegation an investigation is started. The Warden stated that all reports from other institutions come to him and he forwards them to SIS or SIA for investigation. The Warden is new to the facility and had no examples he was able to provide, but one investigation file reviewed by this auditor was a report received by another facility. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.64 Staff first responder duties	
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.64 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that 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: separate the alleged victim and abuser, preserve and protect any crime scene, request that the alleged victim not take any actions that can destroy physical evidence and ensure that the alleged abuser does not take any actions that can destroy physical evidence.</p>

	<p>As per the PAQ there were five allegations of sexual abuse in the past 12 months. As per the PAQ, on all five occasions reported at that time, the first staff member to respond separated the alleged abuser from the alleged victim. One allegation was reported within the time period that still allowed for the collection of physical evidence. Three staff who acted as first responders reported that the first thing they must do is separate the alleged victim from the alleged perpetrator, secure the scene, and contact the lieutenant. Four inmates who reported sexual abuse were interviewed. Two report that staff responded quickly, and two felt like it wasn't quick enough, but they were not in imminent danger. All four inmates report that they were separated from their alleged abuser, seen by medical and psychology, and interviewed. FCI McKean is compliant with this provision of the standard.</p> <p>115.64 (b)</p> <p>As per P.S. 5324.12, staff are responsible for preserving the crime scene only, SIS staff are responsible for collecting information and evidence. All fifteen random staff interviewed reported that their first thing on site is to separate the alleged abuser from the alleged victim, secure the crime scene, and notify the lieutenant. All fifteen random staff noted that they do not collect evidence they just secure the scene and ensure that the alleged victim and alleged abuser do not compromise any physical evidence by showering, brushing their teeth, changing their clothing, and using the bathroom. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of the standard.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.65 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse to include medical, mental health, leadership, security and investigatory staff. P.S. 5324.12 and FCI McKean institution supplement MCK 5324.12e, outlines the plan as such, staff report incidents of sexual abuse to the Operations Lieutenant, who refers the victim to Health Services for a physical assessment, and Psychology Services for assessment of vulnerability and treatment needs as well as notifies all applicable parties including the investigative staff, the Warden, and the PREA Compliance Manager. If the PREA Compliance Manager reviews the relevant factors and makes a determination of what level of response is required. As per the Warden, the facility has a plan to coordinate actions among staff first responders, medical, and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse. As per the fifteen random staff interviewed there is a response plan in which security, investigative, medical, mental</p>

	<p>health, and management are involved. FCI McKean is compliant with all provisions of this standard.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.66 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew 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. As per a memo dated September 8, 2023 from the Warden, no collective bargaining agreements have been entered into since the last PREA audit in April 2021. FCI McKean is compliant with this standard.</p>

115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.67 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall establish a policy to protect all inmates and staff 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 a staff member or department charged with monitoring retaliation. At FCI McKean the PREA Compliance Manager (PCM) and the SIS Lieutenant is charged with monitoring for retaliation. FCI McKean is compliant with this provision of the standard.</p> <p>115.67 (b)</p> <p>P.S. 5324.12 states that the agency shall employ multiple protection measures 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</p>

for reporting sexual abuse or sexual harassment or for cooperating with investigations. As per the Agency Head, inmates and staff are protected from retaliation through monitoring. The PCM monitors inmates and staff to ensure there is no retaliation for alleging or reporting sexually abusive behavior. This monitoring for inmates includes housing, cell assignments, work assignments, programming changes, and disciplinary actions. For staff, this monitoring includes reassignment of work, posts, performance evaluations, and shift changes. In addition to the monitoring the individual will be offered psychology services to ensure their mental and emotional wellbeing is cared for. As per the Warden, retaliation monitoring is overseen by the PCM and it is done for no less than 90 days. The PCM checks disciplines, housing and programming assignments, among other things. The Warden stated that if there are still concerns at 90 days, retaliation monitoring will continue until it is determined to no longer be needed. The two staff interviewed who conduct retaliation monitoring stated that they do 30-60-90 day reviews and can extend them if necessary, they look at sentry reports, disciplines, and housing changes. The two retaliation monitoring staff noted that some measures that they take to protect inmates and staff from retaliation include housing changes, work assignment changes, and post changes for staff. As per the retaliation monitoring staff, inmates who they are monitoring for retaliation are seen every 30-60-90- days to do a check in. This auditor reviewed documentation of these retaliation monitoring forms while on-site. Retaliation monitoring documentation is found in every applicable investigation file. Four inmates who reported sexual abuse were interviewed, two reported that they feel safe from retaliation, two reported that they did not feel protected from retaliation or revenge. After reviewing the investigation files to ensure that retaliation monitoring is completed in all cases, and interviewing staff and inmates, this auditor finds FCI McKean to be compliant with this provision of the standard.

115.67 (c)

P.S. 5324.12 states that for at least 90 days following a reported incident of sexual abuse the agency shall monitor for any signs of retaliation. P.S. 5324.12 further indicates that the institution PREA Compliance Manager monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. If the initial monitoring indicates a continued need, periodic status checks will occur. As per the PAQ there have been no occurrences of retaliation in the last twelve months. As per the Warden, some actions which are taken when retaliation is suspected are discipline, prosecution, and removal from area. The Warden further stated that it depends on the severity of the allegation. The two retaliation monitoring staff report that they look at program changes, disciplinary reports, incident reports, and staff observations to identify any possible signs of retaliation. Monitoring is done for 90 days or longer. As per the retaliation monitoring staff, there is no maximum time frame to retaliation monitoring, it can continue for as long as it is necessary. This auditor reviewed eight investigation files on site, four of which were allegations of sexual abuse. All four files had a retaliation monitoring form with the 30, 60, and 90 day check documented. FCI McKean is compliant with this provision of the standard.

	<p>115.67 (d)</p> <p>As per P.S. 5324.12 monitoring of inmates shall also include periodic status checks. As per the two retaliation monitoring staff interviewed, they look at incident reports, disciplinary reports, housing changes, program changes, and staff observations when monitoring for retaliation to identify possible indicators of retaliation. As per the two staff interviewed who are responsible for retaliation monitoring, this is done at least every 30 days. FCI McKean is compliant with this provision of the standard.</p> <p>115.67 (e)</p> <p>P.S. 5324.12 states that if any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation will be taken. As per the agency head, if an inmate or staff member who cooperated with an investigation expresses fear of retaliation, that individual will be monitored in the same manner as the individual who reported the allegation and will be protected against such retaliation. As per the agency head some measures which would be taken to ensure safety would be housing changes, program changes, and work supervisor changes. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.68 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements standard 115.43. As per the Warden, agency policy prohibits placing inmates at high risk of sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas unless an assessment has determined there are no available alternative means of separation from potential abusers. A memo from the Warden dated November 8, 2023 states that FCI McKean has not placed any inmates who alleged to have suffered sexual abuse in involuntary segregated housing, therefore no 30 day reviews were needed. The Warden stated that they try to avoid it, but if needed it is documented and SIS maintains the documentation, the Warden reviews if there are issues. As per the Warden and segregated housing staff interviewed, if inmates are placed in involuntary segregation for this purpose, it is only until an alternative means of separation from likely abusers can be arranged. The Warden and the segregated housing staff interviewed noted that the length of time could vary depending on the investigation and the individualized circumstances. The Warden and the segregated housing staff interviewed stated that there were no</p>

	occurrences of this in the last twelve months. FCI McKean is compliant with this standard.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.71 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that when the 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. P.S. 5324.12 further states that at the conclusion of an investigation the allegations must be indicated as either substantiated, unsubstantiated, or unfounded. P.S. 5324.12 outlines the full response protocol which includes what notifications must be made. Two investigative staff were interviewed on-site and report that investigations are initiated immediately following an allegation of sexual abuse or sexual harassment. As per investigative staff, all allegations are investigated in the same manner including third party and anonymous reports. FCI McKean is compliant with this provision of the standard.</p> <p>115.71 (b)</p> <p>P.S. 5324.12 states that the agency shall use investigators who have received specialized training in sexual abuse investigations. This auditor reviewed the training records for thirteen investigative staff ensuring that the specialized training for investigation was completed as per 115.34. As per the two investigative staff interviewed, specialized training was received and reviewed all areas required by 115.34. FCI McKean is compliant with this provision of the standard.</p> <p>115.71 (c)</p> <p>P.S. 5324.12 states that investigators shall gather and preserve direct and circumstantial evidence, shall interview alleged victims, suspected perpetrators and witnesses, and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. P.S. 5324.12 clarifies that evidence collection is not a staff first responder responsibility. That is conducted by the investigators. P.S. 5324.12 further clarifies that previous unsubstantiated or unfounded complaints and reports cannot be used as evidence. As per the two investigators interviewed, the first steps to initiate an investigation is to notify the appropriate areas such as the Warden, PREA Compliance Manager (PCM), psychology, medical, and conduct interviews to ascertain what occurred or is alleged to have occurred. The investigation process typically lasts no more than 30 days as per the investigative staff. The investigative staff stated that they would collect interviews, video from the camera system, pictures, information on the inmates involved and or staff, and if other evidence</p>

needed to be collected the Evidence Recovery Team (ERT) would come in to collect. FCI McKean is compliant with this provision of the standard.

115.71 (d)

P.S. 5324.12 states that when the evidence appears to support criminal prosecution, the agency shall conduct compelled interviews after consulting with prosecutors. As per the investigative staff interviewed, if evidence indicates that a prosecutable crime may have taken place the Warden is notified, and he would contact the FBI or OIG. The facility staff do not conduct criminal investigations. FCI McKean is compliant with this provision of the standard.

115.71 (e)

P.S. 5324.12 states that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and should not be determined by the person's status as an inmate or staff. P.S. 5324.12 further states that a polygraph examination shall not be required. As per the two investigative staff interviewed, the credibility of an alleged victim, suspect, or witness is judged individually. The investigative staff and all four inmates who reported sexual abuse stated that the use of truth telling devices or polygraphs are not used as part of a sexual abuse or sexual harassment investigation. FCI McKean is compliant with this provision of the standard.

115.71 (f)

P.S. 5324.12 states that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports that included description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. P.S. 5324.12 states that administrative investigations should also consider whether other factors such as physical layouts, staffing patterns, institution operations, contributed to the abuse. As per the two investigative staff interviewed, all administrative investigations are documented, and the investigation file includes reports, evidence, and interviews. This auditor reviewed eight investigation files while on-site. All files include reports, evidence collected, interviews, findings, retaliation monitoring forms if applicable, incident review team reports if applicable, and medical and mental health reports if applicable. As per the investigative staff interviewed, during their investigation and after the investigation as part of the incident review team, the incident is reviewed to assess whether any staff failures to act or their actions contributed to the alleged abuse. FCI McKean is compliant with this provision of the standard.

115.71 (g)

P.S. 5324.12 states that criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence. As per the investigative staff, criminal investigations would be documented by the FBI or OIG. There were no criminal investigations in the last twelve months. FCI McKean is compliant with this provision of the standard.

	<p>115.71 (h)</p> <p>P.S. 5324.12 states that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. As per the PAQ there have been no allegations of conduct that appear to be criminal that were referred for prosecution since the last audit. As per the two investigative staff interviewed, if there appears to be a criminal act committed, the Warden would be notified, and he would refer to the FBI or OIG. FCI McKean is compliant with this provision of the standard.</p> <p>115.71 (i)</p> <p>P.S. 5324.12 states that all written reports shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The PCM confirmed this as well. Files are maintained in a locked area. FCI McKean is compliant with this provision of the standard.</p> <p>115.71 (j)</p> <p>P.S. 5324.12 states that the departure of the alleged abuser or victim from employment or control of the facility or agency shall not provide a basis for terminating the investigation. As per the two investigative staff interviewed, if the alleged victim or alleged abuser should leave the facility, or leave employment with the facility, the investigation would continue until completed. FCI McKean is compliant with this provision of the standard.</p> <p>115.71 (l)</p> <p>P.S. 5324.12 states that the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. As per the two investigative staff interviewed, the PREA Coordinator, the Warden, and the PCM, when the FBI or OIG is conducting a criminal investigation, the facility investigators are to act as the liaison. They would provide and gather information as requested and stay in contact for regular updates on the progress of the investigation. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.72 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall impose no standard higher than a preponderance of the</p>

	<p>evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Both investigative staff interviewed report that a preponderance of the evidence is the standard required to substantiate allegations of sexual abuse or sexual harassment. FCI McKean is compliant with all provisions of this standard.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.73 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that following an investigation into an inmate's allegation of sexual abuse, the Special Investigative Lieutenant provides the inmate with notification of the outcome of the investigation. The PREA Compliance tracking log was provided to this auditor and it has a section in which the investigator must note that the inmate was informed of the investigation outcome. While on site this auditor reviewed eight investigation files and found a notification form signed by the inmate in all files notifying the inmate of the outcome of the investigation. A template of the memo to the inmate was also provided to this auditor. As per the PAQ 13 investigations were completed and 12 inmates were provided with notification of the outcome of the investigation. The inmate who was not provided notification was unable to be contacted due to release despite attempts to notify which are documented. Both investigative staff interviewed stated that inmates who make allegations of sexual abuse must be informed as to the outcome of the investigation. Three of the four inmates who were interviewed that reported sexual abuse report that they are aware that they are to be provided notification at the conclusion of the investigation as to the finding. FCI McKean is compliant with this provision of the standard.</p> <p>115.73 (b)</p> <p>P.S. 5324.12 states that if the agency did not conduct the investigation, it shall request the information from the investigative agency in order to inform the inmate. As per the PAQ there have been no investigations conducted by outside agencies in the last twelve months. FCI McKean is compliant with this provision of the standard.</p> <p>115.73 (c)</p> <p>P.S. 5324.12 states that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the inmate shall be informed when the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. There were no substantiated or unsubstantiated allegations against staff</p>

	<p>members in the last twelve months. FCI McKean is compliant with this provision of the standard.</p> <p>115.73 (d)</p> <p>P.S. 5324.12 states that following an inmate allegation of sexual abuse by another inmate, the agency shall inform the alleged victim whenever the agency learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. All four inmates interviewed who reported sexual abuse had unfounded investigation findings therefore notifications were not made. FCI McKean is compliant with this provision of the standard.</p> <p>115.73 (e)</p> <p>P.S. 5324.12 states that all notifications shall be documented and maintained in the investigation file. This auditor reviewed eight investigation files on site and verified that all eight had notification memos signed by the inmate in the file. All twelve notifications given to inmates were documented as per the PAQ. This auditor verified that all eight investigation files reviewed had a memo to the inmate indicating the findings, each memo was signed by the inmate to indicate it was received. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.76 Disciplinary sanctions for staff	
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.76 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that Bureau employees are subject to the Program Statement Standards of Employee Conduct, the Master Agreement, and employment-based laws rules and regulations. P.S. 5324.12 further states that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. P.S. 3420.11 Standards of Employee Conduct states that an employee may not engage in, or allow another person to engage in, sexual behavior with an inmate. P.S. 3420.11 further states that all allegations of sexual abuse will be thoroughly investigated and when appropriate referred to the authorities for prosecution. FCI McKean is compliant with this provision of the standard.</p> <p>115.76 (b)</p>

P.S. 5324.12 states that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. P.S. 5324.12 further states that if evidence supports that a staff member engaged in sexual abuse the matter will first be referred for criminal prosecution. Administrative discipline will be conducted using the Program Statement Standards of Employee Conduct, the Program Statement Human Resource Management Manual, and the collective bargaining agreement. A memo dated September 8, 2023 from the Warden and the PAQ indicates that there were no resignations or terminations due to PREA allegations during the last year. As per the PAQ no staff have violated the agency sexual abuse and sexual harassment policies in the last twelve months. FCI McKean is compliant with this provision of the standard.

115.76 (c)

P.S. 5324.12 states that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff members disciplinary history, and the sanctions imposed for comparable offenses by other staff and similar histories. As per the PAQ there have been no occurrences of staff violating the facility's sexual abuse and sexual harassment policies in the last twelve months. FCI McKean is compliant with this provision of the standard.

115.76 (d)

P.S. 5324.12 states that 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, should be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies. As per the PAQ there have been no occurrences of staff violating the facility's sexual abuse and sexual harassment policies in the last twelve months. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.77 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies or other relevant licensing bodies, unless the activity was not criminal. The Warden stated that any contractor or volunteer who violates the sexual abuse or sexual harassment</p>

	<p>policy of the facility will not be allowed access to the facility, access would be revoked immediately. FCI McKean is compliant with this provision of the standard.</p> <p>115.77 (b)</p> <p>P.S. 5324.12 states that appropriate remedial measures shall be taken and shall consider 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. A memo dated September 8, 2023 from the Warden and the PAQ state that there have been no reports of sexual abuse by contractors or volunteers. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.78 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding or criminal finding of guilt that the inmate engaged in inmate-on-inmate sexual abuse. As per the PAQ there have been no administrative or criminal findings of substantiated inmate on inmate sexual abuse in the last twelve months. FCI McKean is compliant with this provision of the standard.</p> <p>115.78 (b)</p> <p>P.S. 5324.12 states that 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 Warden stated that inmate disciplinary measures for violating the sexual abuse and sexual harassment policy are proportionate to the nature and circumstance of the abuse committed, the inmate’s disciplinary history, and sanctions imposed for similar offenses by other inmates with similar histories. FCI McKean is compliant with this provision of the standard.</p> <p>115.78 (c)</p> <p>P.S. 5324.12 states that disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what sanctions should be imposed. The Warden further stated during his interview that mental disability and illness is always considered when sanctioning inmates for any violation. FCI McKean is compliant with this provision of the</p>

	<p>standard.</p> <p>115.78 (d)</p> <p>P.S. 5324.12 states that the facility shall consider whether to require the offending inmate to participate in therapy, counseling, or other interventions as a condition of access to programming or other benefits. As per the medical and mental health staff interviewed, inmates who have been found to be sexually abusive towards other inmates are referred to psychology and offered services to address the underlying reasons or motivations for sexual abuse. Both medical and mental health staff interviewed report that an inmate’s participation in such services offered is not a requirement, it is strictly voluntary. FCI McKean is compliant with this provision of the standard.</p> <p>115.78 (e)</p> <p>P.S. 5324.12 states that an inmate can be disciplined for sexual contact with staff but only upon a finding that the staff member did not consent to such contact. P.S. 5324.12 further clarifies that sexual abuse and sexual harassment of staff members should be addressed through other existing statutes, policies, and procedures such as using the inmate discipline system and referral to criminal prosecution. A memo dated September 8, 2023 from the Warden indicates that there were no substantiated PREA cases within the audit year in which an inmate engaged in sexual conduct with a staff member. FCI McKean is compliant with this provision of the standard.</p> <p>115.78 (f)</p> <p>P.S. 5324.12 states that a report of sexual abuse made in good faith-based upon a reasonable belief that the alleged conduct occurred shall not constitute as a false report even if the investigation does not establish evidence sufficient to substantiate the allegation. P.S. 5324.12 clearly states that inmates will be held responsible for manipulative behavior and intentionally making false allegations. FCI McKean is compliant with this provision of the standard.</p> <p>115.78 (g)</p> <p>P.S. 5324.12 states that all sexual activity between inmates is prohibited and is subject to discipline. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.81 (a)

P.S. 5324.12, Sexually Abusive Behavior and Intervention Program states that if the inmates risk screening indicates they have experienced prior sexual victimization, whether it occurred in an institution or in the community, the inmate is offered a follow up meeting with Psychology Services within 14 days of the intake screening. The two risk screening staff interviewed report that if a screening indicates that an inmate has experienced prior sexual victimization it is flagged and sent to psychology. This flag will task psychology with a follow-up. Four inmates who disclosed sexual victimization during risk screening were interviewed. Three reported being offered services, one reports that he was not. Of the three that report being offered services, one followed up with psychology and continues to work through it with the on-site psychology staff. FCI McKean is compliant with this provision of the standard.

115.81 (b)

P.S. 5324.12 states that if the risk screening indicates that the inmate previously perpetrated sexual abuse, whether in an institution or the community, staff shall ensure that the inmate is offered a follow up meeting with the mental health practitioner within 14 days of the intake screening. As per the PAQ 100% of all inmates who reported prior perpetuation of sexual abuse were provided with a follow up meeting with psychology. As per the two risk screening staff interviewed, if the screening indicates that an inmate previously perpetrated sexual abuse, it is flagged to send to psychology. Psychology is then tasked with follow-up. FCI McKean is compliant with this provision of the standard.

115.81 (c)

FCI McKean is a prison therefore this provision is not applicable.

115.81 (d)

P.S. 5324.12 states that 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. As per the medical and mental health staff interviewed, informed consent is obtained from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. FCI McKean is compliant with this provision of the standard.

115.81 (e)

P.S. 5324.12 states that 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 inmate is under the age of 18. As per the medical and mental health staff interviewed, informed consent is obtained from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. FCI McKean is compliant with this provision of the standard.

FCI McKean is compliant with all provisions of this standard.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.82 (a)</p> <p>P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that 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. P.S. 5324.12 further details the procedures for inmate victims. Medical staff are responsible for examination, documentation, and treatment of inmate injuries arising from sexually abusive behaviors. When an inmate self-reports, or is referred to health services, medical staff will notify Psychology Services and Correctional Services prior to conducting an injury assessment. Health services staff are to perform the injury assessment without compromising forensic evidence. The forensic examination is performed by a qualified sexual assault examiner at the local hospital. The forensic examination should occur as soon as practicable, but within 72 hours of staff becoming aware that an inmate reported involvement in a sexually abusive assault. P.S. 5324.12 also outlines the procedures for alleged inmate perpetrators. Health services clinicians will perform a physical injury assessment on any alleged inmate perpetrator without compromising forensic evidence. As per a memo dated September 8, 2023, from the Warden, inmates have access to emergency medical and mental health care when needed via on-site providers and/or the local hospital. As per the two medical and mental health staff interviewed, inmates are provided with timely and unimpeded access to emergency medical treatment and crisis intervention services. All four inmates who were interviewed who reported sexual abuse report that they received medical and mental health services in a timely fashion. FCI McKean is compliant with this provision of the standard.</p> <p>115.82 (b)</p> <p>P.S. 5324.12 states that if no qualified medical or mental health practitioners are on duty at the time of the report of a recent abuse is made, security staff first responders will take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Three first responders were interviewed and stated that when responding to sexual abuse they must separate the alleged victim from the alleged abuser, ensure the safety of the alleged victim, secure the scene, and notify a supervisor. The lieutenant would then notify medical and mental health. FCI McKean is compliant with this provision of the standard.</p> <p>115.82 (c)</p> <p>P.S. 5324.12 states that Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and</p>

	<p>sexually transmitted infections prophylaxis. Medical staff interviewed report that they provide victims of sexual abuse access to sexually transmitted infection prophylaxis if appropriate. All four inmates who reported sexual abuse who were interviewed report that this was not applicable to them. FCI McKean is compliant with this provision of the standard.</p> <p>115.82 (d)</p> <p>P.S. 5324.12 states that 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. All four inmates who reported sexual abuse report that there were no costs imposed on them for the medical and mental health services provided as a result of the allegation of sexual abuse made. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83 (a)</p> <p>P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that 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 shall be offered. FCI McKean is compliant with this provision of the standard.</p> <p>115.83 (b)</p> <p>P.S. 5324,12 states that the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Medical and mental health staff interviewed report that an evaluation and treatment of inmates who have been victimized entails assessment, interview, evaluation if necessary, and follow up services if needed. Three of the four inmates who reported sexual abuse reported that they were provided services and offered follow ups. It was stated by two of the inmates that psychology staff is always available to them. FCI McKean is compliant with this provision of the standard.</p> <p>115.83 (c)</p> <p>P.S. 5324.12 states that victims will be provided with medical and mental health services consistent with the community level of care. Both medical and mental</p>

	<p>health staff report that the services offered at the facility are consistent with the community level of care. One staff member suggested that more psychology staff should be available, currently the facility is short staffed, but all the inmates who need services are receiving them it's just a lot of work on few staff. FCI McKean is compliant with this provision of the standard.</p> <p>115.83 (d)(e)</p> <p>FCI McKean is an all-male facility. Provisions d and e are not applicable.</p> <p>115.83 (f)</p> <p>P.S. 5324.12 states that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. All four inmates who reported sexual abuse who were interviewed reported that testing for sexually transmitted infections was not applicable to them. Medical and mental health staff report that this is offered free of charge when applicable to inmates who report sexual abuse. FCI McKean is compliant with this provision of the standard.</p> <p>115.83 (g)</p> <p>As per P.S. 5324.12, all treatment services are to 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. All four of the inmates who reported sexual abuse who were interviewed stated that they were not charged anything for services received related to their allegation. FCI McKean is compliant with this provision of the standard.</p> <p>115.83 (h)</p> <p>As per P.S. 5324.12, a mental health evaluation of all known inmate-on-inmate abusers will be conducted within sixty days of learning of such abuse history and treatment will be offered when deemed appropriate by mental health practitioners.</p> <p>As per the medical and mental health staff interviewed, perpetrators of sexual abuse get assessed by mental health and medical as well. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.86 (a)</p> <p>FCI McKean conducts sexual abuse incident reviews at the conclusion of every sexual</p>

abuse investigation unless the allegation has been determined to be unfounded as per P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program. As per a memo dated September 18, 2023 from the Warden, there have been 13 closed PREA investigations during the audit year, and all thirteen have had after action reviews in which one had a recommendation for refresher training, which was completed. The PCM does a review of all the investigations upon completion.

Incident Review Team reviews are only done on unsubstantiated or substantiated sexual abuse investigations. There was one conducted in the twelve months preceding the audit. This auditor was provided with the Incident Review Team documentation on-site. Incident Reviews are conducted for all substantiated and unsubstantiated sexual abuse investigations. The PCM provided this auditor with a memo which outlines the format of the Incident Review Team meeting. As per the PAQ, one incident review was conducted for one sexual abuse incident that was not unfounded. As per the PCM they have a pending incident review for the other unsubstantiated incident. FCI McKean is compliant with this provision of the standard.

115.86 (b)

As per the P.S. 5324.12 and interviews with three members of the Incident Review Team, this review occurs within 30 days of the conclusion of the investigation. FCI McKean is compliant with this provision of the standard.

115.86 (c)

As per P.S. 5324.12, the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. As per P.S. 5324.12, the review team also includes input from the local Union President or his/her designee. As per the memo template for the Incident Review Team, it consists of the Associate Warden, PCM, Captain, Chief Psychologist, Health Service Administrator, SIA/SIS, and the Unit Manager. FCI McKean is compliant with this provision of the standard. As per the Warden, FCI McKean has an Incident Review Team which consists of upper-level management officials and allows for input from line supervisors, investigators, and medical and mental health. FCI McKean is compliant with this provision of the standard.

115.86 (d)

As per P.S. 5324.12, the review team shall consider and do the following: 1) Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. 2) Whether the incident or allegation was motivated by race; ethnicity; gender identity; or perceived status; or gang affiliation; was motivated or otherwise caused by other group dynamics of 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. 6) Prepare a report of its findings, including but not necessarily limited to determinations made and any recommendations for improvement and submit such a

	<p>report to the facility head and PREA Compliance Manager. This auditor reviewed the memo used for the Incident Review and verified that it includes all considerations required by this provision of the standard. As per the Warden, the Incident Review Team uses the information from the reviews to identify training needs, look at the camera system and staffing, and identify if additional resources are needed. As per the Warden, and the three staff interviewed who are part of the incident review team the review team considers all requirements of this provision as part of the review.</p> <p>The PREA Compliance Manager (PCM) stated that the incident reviews are documented and provided this auditor with a sample. The PCM reviews all findings from the incident review team and files them. If there are any recommendations, they are addressed either through reviewing policy for potential change, training, or sending requests for other changes to central office. As per the three incident review team staff interviewed, the area of the facility where the incident occurred is assessed to determine if there are any physical barriers that may enable abuse, staffing levels are reviewed, and monitoring technology is assessed to determine if changes need to be made. FCI McKean is compliant with this provision of the standard.</p> <p>115.86 (e)</p> <p>As per P.S. 5324.12, the facility shall implement the recommendations for improvement or shall document its reasons for not doing so. This auditor was provided with a memo and documentation indicating that one incident review resulted in a recommendation to provide refresher training in the report writing system. This recommendation was implemented with the Lieutenants. FCI McKean is compliant with this provision of the standard.</p> <p>FCI McKean is compliant with all provisions of this standard.</p>
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115.87	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 (a)</p> <p>FCI McKean is part of the Federal Bureau of Prisons (BOP). All BOP facilities were audited in the previous three-year audit cycle.</p> <p>115.401 (b)</p> <p>FCI McKean is part of the Federal Bureau of Prisons (BOP). The BOP has a schedule for all their facilities to be audited within a three-year audit cycle, with one third being audited each year. FCI McKean is being audited in the second year of the current three-year cycle.</p> <p>115.401 (h)</p> <p>This auditor had access to and the ability to observe all areas of the facility while on-site.</p> <p>115.401 (i)</p> <p>This auditor was permitted to request and receive copies of any relevant documents including electronically stored information.</p> <p>115.401 (m)</p> <p>This auditor was able to conduct private interviews with inmates while on-site.</p> <p>115.401 (n)</p> <p>Inmates were permitted to send confidential information and/or correspondence to the auditor in the same manner as if they were communicating with legal counsel. One letter was received by this auditor. This auditor observed the facility postings while on site and was sent copies of them 6 weeks prior to the on-site portion of the audit indicating how to send correspondence to the auditor. Inmates and staff acknowledged seeing the signage throughout the facility during interviews while on-site.</p> <p>This auditor finds FCI McKean to be in compliance with all provisions of this</p>

	standard.
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115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	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
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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.)	na
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional	yes

	practices?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	

	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or	yes

	genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes

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

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

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e) Hiring and promotion decisions		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f) Hiring and promotion decisions		
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have	yes

	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?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes

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

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes

	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	

	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes

	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	

	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental	yes

	health care practitioners who work regularly in its facilities.)	
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g) Screening for risk of victimization and abusiveness		
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h) Screening for risk of victimization and abusiveness		
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i) Screening for risk of victimization and abusiveness		
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to	yes

	shower separately from other inmates?	
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	no
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	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.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, 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.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations 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
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has	yes

	committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d) Reporting to inmates		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually 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
115.73 (e) Reporting to inmates		
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a) Disciplinary sanctions for staff		
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b) Disciplinary sanctions for staff		
	Is termination the presumptive disciplinary sanction for staff who	yes

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

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	

	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph §	yes

	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.)	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

PREA Agency Audit Report: Final

Name of Agency: Federal Bureau of Prisons

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/04/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Marc Coudriet	Date of Signature: 10/04/ 2023

AUDITOR INFORMATION	
Auditor name:	Coudriet, Marc
Email:	usmc58312215@outlook.com
Start Date of On-Site Audit:	
End Date of On-Site Audit:	

AGENCY INFORMATION	
Name of agency:	Federal Bureau of Prisons
Governing authority or parent agency (if applicable):	U.S. Department of Justice
Physical Address:	320 1st Street Northwest, Washington , Dist. Columbia - 20534
Mailing Address:	

Telephone number:	2023073250
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Agency Chief Executive Officer Information:	
Name:	Colette S. Peters, Director
Email Address:	bop-rsd-preacoordinator@bop.gov
Telephone Number:	(202) 307-3250

Agency-Wide PREA Coordinator Information			
Name:	Cynthia Campagna	Email Address:	ccampagna@bop.gov

Agency AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
10	
Number of standards not met:	
0	

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Pre-Audit Questionnaire.</p> <p>BOP PREA Plan</p> <p>Agency zero-tolerance statement.</p> <p>Organizational charts, interviews.</p> <p>INTERVIEWS.</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p>

Agency Directives and BOP PREA Plan address the requirements of this provision. The agency mandates a zero-tolerance directive towards all forms of sexual abuse and sexual harassment and outlines the agency's strategies on preventing, detecting, and responding to such conduct. Agency policies addressed "Preventing" sexual abuse and sexual harassment through the designation of a PREA Coordinator and PREA Compliance Manager, Criminal Background Checks (Staff, Contractors, and Volunteers, as applicable), Training (Staff, Volunteers, and Contractors), Staffing, Intake Screening, Classification, Inmate Education, Posting of Signage (PREA Posters, etc.) and Contract Monitoring. The Directives addressed "Detecting" sexual abuse and sexual harassment through Training (Staff, Volunteers, and Contractors), and Intake Screening.

The policies addressed "Responding" to allegations of sexual abuse and sexual harassment through Reporting, Investigations, Victim Services, Medical and Mental Health Services, Disciplinary Sanctions for Staff (including notification to licensing agencies), Incident Review Teams, and Data Collections and Analysis.

The Inmate Handbook, PREA Posters, and PREA Brochures do address sexual abuse by another inmate, and the Inmate Handbook does address sanctions for inmates when involved in such conduct. Based on interviews and a review of agency policies, BOP staff closely monitor for inmate-on-inmate sexual misconduct in accordance with the agency's PREA policies; allegations are reported and investigated, and inmates are held accountable. By policy, the Inmate handbooks are reviewed and updated at least annually at each BOP institution.

115.11(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Agency's organizational chart.

INTERVIEWS:

PREA Coordinator.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) the position of the agency PREA Coordinator, which outlines the roles and responsibilities of the position and calls for the position being allowed enough time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in each facility.

The agency's organizational chart reflects that the agency PREA Coordinator position is an upper-level position with agency-wide oversight. The agency PREA Coordinator position reports to the Assistant Director, Reentry Services Division.

The PREA Coordinator was interviewed and reported to have enough time to focus on the PREA standards and the freedom to divert responsibilities to other staff as needed to focus on the audit. A review of the agency directive, agency's organization chart,

	<p>and based on the interview with the designated agency's PREA Coordinator, the Auditor determined the agency demonstrates it meets the requirements of this provision of this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.12(a) (b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. The agency reported there were a total of zero contracts for the confinement of inmates and 161 Residential Reentry Centers (RRCs) that the agency had entered or renewed with private entities or other government agencies.</p> <p>A review of the agency directive reflected all contracts will meet the required entity's obligation to adopt and comply with the PREA standards.</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. The agency reported the agency-wide contracts would require the agency to monitor the contractor's compliance with the PREA standards.</p> <p>If the agency contracted the confinement of its inmates, the agency's Contract Administrator would be required to maintain regular contact with every inmate placed in a contract facility. If there are concerns, agency protocol requires the inmate be removed from the facility and the facility allows time to make corrective action and address the concerns.</p> <p>Corrective actions are addressed before the facility is reconsidered. Notification would also be made to law enforcement. The Contract Administrator would annually collect credentialing documentation for each facility: facility license; staff licenses or certifications; daily schedule; and monitoring reports or the licensing agency's website regarding the facility's status; and tours the facility. The BOP is no longer actively soliciting new contracts with private facilities.</p>

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>

Auditor Discussion

115.17(a) (e)(h)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Supporting Documentation.

FINDINGS:

PS 3000.03 Human Resource Management Manual, PS 3420.11, Standards of Employee Conduct, the Pre-Employment Guide, SF85P (Questionnaire for Public Trust Positions) and a BOP recruitment document address the requirements of the standard. All employees who have contact with inmates have had a full field background investigation in addition to fingerprinting and inquiry into the FBI's National Crime Information Center (NCIC). Employee backgrounds are re-checked every five years. Contractors and volunteers who have regular contact with inmates also have criminal background checks completed prior to having contact with inmates. Volunteer and contractor background checks are repeated yearly. The facility does not hire or promote anyone who may have contact with inmates and does not enlist the services of any contractor who may have contact with inmates who has engaged in any type of sexual abuse/harassment (no exceptions). Employees have a duty to disclose such misconduct and material omissions regarding such misconduct would be grounds for termination. Submission of false information by any applicant is grounds for not hiring the applicant.

The Agency Head designee was interviewed and confirmed that the agency HR attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. The Agency Head designee also confirmed that the agency provides 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. The agency notifies appropriate licensing/certifying agencies when professional staff members are terminated for substantiated allegations of sexual abuse or sexual harassment. A review of policy, personnel forms, and relevant supporting documentation, including staff interviews, confirm compliance with this standard.

115.17(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. Agency Head designee reported the agency has incorporated and implemented the "Affirmative Duty to Disclose," which all staff were required to affirm and sign. The form includes a "material omissions" clause.

115.17(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head.

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. The agency directive requires job applicants to have background checks completed looking at any issue of prior sexual misconduct. The background checks are completed prior to any inmate contact. All contractors are screened by using the same process.

115.17(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) the elements of this provision. Agency directive defines staff to include volunteer or contracted program services staff. All staff are also subjected to a criminal background check.

115.17(f)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan. HR Files.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision.

	<p>The application process includes the "Affirmative Duty to Disclose" form for new hires, volunteers and contractors, and a review of the HR files indicated this process was being implemented. The HR files reviewed indicated the forms had been signed in accordance with directive.</p> <p>A review of agency directives and HR files, and Agency Head designee interview, indicate the practice is in place and meets the requirements of this provision.</p> <p>115.17(g)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directives and BOP PREA Plan address this provision. Agency directive defines staff to include volunteer or contracted program services staff.</p>
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115.18 Upgrades to facilities and technologies	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.18(a)</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head designee confirm that the standard is being met.</p> <p>FINDINGS:</p> <p>The agency considers how all new facility designs and technology upgrades may enhance the Bureau’s ability to protect against sexual abuse. In existing institutions, we review all “Substantiated” and “Unsubstantiated” cases of inmate sexual abuse to determine if modifications to design or the addition or upgrade of technology would help prevent a similar occurrence in the future.</p> <p>115.18(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Video Surveillance Schematic.</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head designee confirm that the standard is being met.</p> <p>FINDINGS:</p>

	<p>Institution reviews are ongoing to determine if upgrades or additions to our existing technology would enhance the protection of inmates from incidents of sexual abuse. The technology serves as a deterrent but also allows us to identify unreported victims and perpetrators of sexually abusive behavior. It also aids in successful criminal prosecutions. It is recommended that BOP receive the funding to procure additional cameras and an inmate RFID system to enhance the safety and security of the staff and inmates for each of its institutions.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.42(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directive and the PREA Screen Tool.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>PS 5324.12 addresses the requirement of the standard. The information obtained in the inmate screening process is used to make individualized determinations to ensure the inmates safety. This information is used to make decisions to place each inmate in appropriate housing, work, and program assignments. A classification committee makes the placement decisions. Agency PREA Coordinator reported information secured through the screening process is used to determine the need for additional medical or mental health follow-up, and to make classification decisions based on risk factors.</p> <p>115.42(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. By policy, special housing is used as a last resort and staff look for other options, such as housing unit</p>

	<p>changes. Agency PREA Coordinator reported the welfare of the inmate is always a high consideration. Medical and mental health are to conduct daily visits for any inmates placed in special housing for PREA risk factors.</p> <p>115.42(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. Agency PREA Coordinator reported the facility does not have specific housing units designated for lesbian, gay, bisexual, transgender, or intersex inmates. All housing, program and work assignments are made on a case-by-case basis.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.66(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency Head.</p> <p>FINDINGS:</p> <p>The Collective Bargaining Agreement (CBA) examined by the auditor, between the Federal Bureau of Prisons and Council of Prison Locals, American Federation of Government Employees, dated July 21, 2014-July 20, 2017, complies with this standard. The agreement does not limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The auditor was advised that the CBA is currently being renegotiated and will contain the required language in its final form.</p>

115.87	Data collection
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 485 376">115.87(a and c)</p> <p data-bbox="256 416 783 452">DIRECTIVE AND DOCUMENT REVIEW:</p> <p data-bbox="256 488 804 524">Agency Directives and BOP PREA Plan.</p> <p data-bbox="256 560 405 595">FINDINGS:</p> <p data-bbox="256 631 1474 954">PS 5324.12 addresses the requirement of the standard. As confirmed by a review of documents, BOP collects accurate, uniform data for every allegation of sexual abuse/ harassment by using a standardized instrument. The agency tracks information concerning sexual abuse using data from the SIS department, the agency's Office of Internal Affairs and SENTRY, the BOP's computerized data management program. The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the Department of Justice.</p> <p data-bbox="256 990 1422 1106">The agency aggregates and reviews all data annually. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p data-bbox="256 1142 400 1178">115.87(b)</p> <p data-bbox="256 1214 783 1249">DIRECTIVE AND DOCUMENT REVIEW:</p> <p data-bbox="256 1285 804 1321">Agency Directives and BOP PREA Plan.</p> <p data-bbox="256 1357 405 1393">FINDINGS:</p> <p data-bbox="256 1429 1458 1590">Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the facility tracking information reflected a comprehensive system designed to maintain various elements for the required data for sexual abuse and sexual harassment allegations.</p> <p data-bbox="256 1626 400 1662">115.87(d)</p> <p data-bbox="256 1697 804 1733">Agency Directives and BOP PREA Plan.</p> <p data-bbox="256 1769 405 1805">FINDINGS:</p> <p data-bbox="256 1841 1442 2092">Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the agency website reflects the comprehensive report is published and available to the public for all serious incidents to include sexual abuse and sexual harassment allegations. The annual PREA reports can be found at https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp.</p>

	<p>115.87(e)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p> <p>115.87(f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.88(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan. Annual report.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the annual report reflects all the elements required by this provision.</p> <p>Staff interviewed reported in detail the process followed when reviewing the data, identifying problem areas and corrective action, and preparing the annual report.</p> <p>115.88(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p>

	<p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p> <p>115.88(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>Annual report.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>PS 5324.12 addresses the requirement of the standard. The Bureau of Prisons and the institution reviews and assesses all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection, and response policies, to identify any trends, issues, or problematic areas and to take corrective action if needed. The Institution PREA Compliance Manager (IPCM) forwards data to the respective BOP Regional PREA Coordinator and then to the National BOP PREA Coordinator. An Annual Report has been prepared and placed on the BOP website. The auditor reviewed the Annual Report. The report can be found at the following website address: www.bop.gov.</p> <p>115.88(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. Agency PREA Coordinator reported the BOP complies with FOIA and all other applicable laws, rules, and regulations. No information that identifies victims or perpetrators is included in the report, nor is any information that could potentially threaten the security of an institution. The reports would reflect only basic demographic information.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.89(a)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency PREA Coordinator.

FINDINGS:

PS 5324.12 addresses the requirement of the standard. The National PREA Coordinator reviews data compiled by each BOP facility, from SENTRY, from each Regional PREA Coordinator, from the Information Technology and Data Division of the BOP and from the Office of Internal Affairs and issues a report to the Director on an annual basis. Facility data is maintained in locked files or on computer databases that are user ID and password protected. Agency PREA data is securely retained and is published on the BOP website after removing all personal identifying information.

115.89(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data posted on the agency website includes agency data from the previous year.

115.89(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on agency website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data posted on the agency website has all personal identifiers removed.

115.89(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on agency website.

	<p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision. The data and records collected are to be retained in accordance with agency retention requirements.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination:
	Auditor Discussion
	<p>115.401(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>The agency ensured that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once.</p> <p>115.401(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>This is the Agency’s first year of cycle 4. The agency is following their audit cycle and planned future audits. The data was posted on the agency website.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.403(f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no agency directive for this provision.</p> <p>FINDINGS:</p> <p>BOP has published on its agency website all Final Audit Reports within 90 days of</p>

	<p>issuance by the Auditor. This information is made available to the public and is in accordance with 28 C.F.R. § 115.405.</p>
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Appendix: Provision Findings		
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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.)	na
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity	yes

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

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

	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.)	
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	

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

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes

	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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.)	na
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes