







| Auditor Information | Auditor Information | | | | |
|--|---------------------------------|------------|-----------|--------------|--|
| Auditor name: | | | | | |
| Address: | | | | | |
| Email: | | | | | |
| Telephone number: | | | | | |
| Date of facility visit: | | | | | |
| Facility Information | | | | | |
| Facility name: | | | | | |
| Facility physical address: | | | | | |
| Facility mailing address: | (if different from above) | | | | |
| Facility telephone number | er: | | | | |
| The facility is: | ☐ Federal | ☐ State | ☐ Coun | - | |
| | ☐ Military | ☐ Municipa | al Privat | e for profit | |
| | ☐ Private not for profit | | | | |
| Facility type: | ☐ Correctional | ☐ Detentio | n 🔲 Othe | r | |
| Name of facility's Chief E | xecutive Officer: | | | | |
| Number of staff assigned | d to the facility in the last 1 | 12 months: | | | |
| Designed facility capacity | y: | | | | |
| Current population of fac | cility: | | | | |
| Facility security levels/in | imate custody levels: | | | | |
| Age range of the populat | ion: | | | | |
| Name of PREA Compliance | ce Manager: | | Title: | | |
| Email address: Telephone number: | | | | | |
| Agency Information | | | | | |
| Name of agency: | | | | | |
| Governing authority or p | arent agency: (if applicable, |) | | | |
| Physical address: | | | | | |
| Mailing address: (if different from above) | | | | | |
| Telephone number: | | | | | |
| Agency Chief Executive Officer | | | | | |
| Name: Title: | | | | | |
| Email address: Telephone number: | | | | | |
| Agency-Wide PREA Coordinator | | | | | |
| Name: Title: | | | | | |
| Email address: Telephone number: | | | | | |

AUDITFINDINGS

NARRATIVE

DESCRIPTION OF FACILITY CHARACTERISTICS

| Number of standards exceeded: | | | |
|-------------------------------------|---|--|--|
| Number of standards met: | | | |
| Number of standards not met: | | | |
| Number of standards not applicable: | | | |
| PREA Audit Report | 4 | | |

SUMMARY OF AUDIT FINDINGS

| Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator | | |
|---|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | .312 Contracting with other entities for the confinement of residents |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |

| Standard 115.313 Supervision and monitoring | | |
|---|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | 315 Limits to cross-gender viewing and searches |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |

| Standard 115.316 Residents with disabilities and residents who are limited English proficient | | |
|---|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | .317 Hiring and promotion decisions |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| Standard 115.318 Upgrades to facilities and technologies | | |
|--|----------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recomi | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion ilso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115. | 321 Evidence protocol and forensic medical examinations |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| Standa | ard 115 | .322 Policies to ensure referrals of allegations for investigations |
|--------|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | .331 Employee training |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | .333 Resident education |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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Standard 115.332 Volunteer and contractor training

| Stand | Standard 115.334 Specialized training: Investigations | | | |
|-------|---|--|--|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. | | |
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| Stand | ard 115 | .335 Specialized training: Medical and mental health care | | |
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. | | |
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| Stariu | alu IIS | .34 i Screening for risk of victimization and abusiveness |
|--------|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | .342 Use of screening information |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| | | Does Not Meet Standard (requires corrective action) |
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| Stand | ard 115 | .352 Exhaustion of administrative remedies |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific |

corrective actions taken by the facility.

Standard 115.351 Resident reporting

| Standard 115.353 Resident access to outside confidential support services | | |
|---|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | .354 Third-party reporting |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |

| Standa | ard 115 | 361 Staff and agency reporting duties |
|--------|---------------------------|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Standa | ard 115 | 362 Agency protection duties |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | detern must a recom | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion ilso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |

| Standa | Standard 115.363 Reporting to other confinement facilities | | | |
|--------|--|---|--|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
| | detern must a recomi | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. | | |
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| Standa | rd 115. | 364 Staff first responder duties | | |
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
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| Standard 115.365 Coordinated response | | |
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| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| Standa | ard 115. | 366 Preservation of ability to protect residents from contact with abusers |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| Standa | Standard 115.367 Agency protection against retaliation | | | |
|--------|---|--|--|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
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| Standa | ord 115 | 368 Post-allegation protective custody | | |
| Otanac | | | | |
| | _ | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
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| Standard 115.371 Criminal and administrative agency investigations | | | | |
|--|---|--|--|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
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| Stand | ard 115 | .372 Evidentiary standard for administrative investigations | | |
| | | Exceeds Standard (substantially exceeds requirement of standard) | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | |
| | | Does Not Meet Standard (requires corrective action) | | |
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| | | Exceeds Standard (substantially exceeds requirement of standard) | |
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| Stand | ard 115 | .376 Disciplinary sanctions for staff | |
| | | Exceeds Standard (substantially exceeds requirement of standard) | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | |
| | | Does Not Meet Standard (requires corrective action) | |
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Standard 115.373 Reporting to residents

| Standard 115.377 Corrective action for contractors and volunteers | | |
|---|----------------------------|---|
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| Standa | rd 115. | 378 Disciplinary sanctions for residents |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
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| | Standard 115.381 Medical and mental health screenings; history of sexual abuse | | | | |
|-------|--|--|--|--|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) | | | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | | |
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| Stand | ard 115 | | | | |
| | | .382 Access to emergency medical and mental health services | | | |
| | | .382 Access to emergency medical and mental health services Exceeds Standard (substantially exceeds requirement of standard) | | | |
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| | | Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the | | | |

| Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers | | | |
|--|---|---|--|
| | | Exceeds Standard (substantially exceeds requirement of standard) | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | |
| | | Does Not Meet Standard (requires corrective action) | |
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| Stand | ard 115 | .386 Sexual abuse incident reviews | |
| | | Exceeds Standard (substantially exceeds requirement of standard) | |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | |
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| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | deterr must a recom | or discussion, including the evidence relied upon in making the compliance or non-compliance innation, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility. |
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| Stand | ard 115 | .388 Data review for corrective action |
| | | Exceeds Standard (substantially exceeds requirement of standard) |
| | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | | Does Not Meet Standard (requires corrective action) |
| | | r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion |

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.

Standard 115.387 Data collection

| Standard 1 | 15.389 Data storage, publication, and destruction |
|-----------------------------|--|
| | Exceeds Standard (substantially exceeds requirement of standard) |
| | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) |
| | Does Not Meet Standard (requires corrective action) |
| det mu rec | litor discussion, including the evidence relied upon in making the compliance or non-compliance ermination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion st also include corrective action recommendations where the facility does not meet standard. These ommendations must be included in the Final Report, accompanied by information on specific rective actions taken by the facility. |
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| AUDITOR (I certify that | t: |
| | The contents of this report are accurate to the best of my knowledge. |
| | No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and |
| | I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template. |
| Auditor Sig | nature Date |