

# PREA Facility Audit Report: Final

**Name of Facility:** Larimer County Community Corrections Residential Program

**Facility Type:** Community Confinement

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 11/10/2024

| 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"/>             |
| <b>Auditor Full Name as Signed:</b> Karen d. Murray   | <b>Date of Signature:</b> 11/10/2024 |

| AUDITOR INFORMATION                 |                        |
|-------------------------------------|------------------------|
| <b>Auditor name:</b>                | Murray, Karen          |
| <b>Email:</b>                       | kdmconsults1@gmail.com |
| <b>Start Date of On-Site Audit:</b> | 09/30/2024             |
| <b>End Date of On-Site Audit:</b>   | 10/02/2024             |

| FACILITY INFORMATION              |  |
|-----------------------------------|--|
| <b>Facility name:</b>             | Larimer County Community Corrections Residential Program |
| <b>Facility physical address:</b> | 2255 Midpoint Drive , Fort Collins , Colorado - 80525    |
| <b>Facility mailing address:</b>  | 2307 Midpoint Drive, Fort Collins, Colorado - 80525      |

| Primary Contact |
|-----------------|
|-----------------|

|                          |                           |
|--------------------------|---------------------------|
| <b>Name:</b>             | Ingrid Schroeder          |
| <b>Email Address:</b>    | schroeil@co.larimer.co.us |
| <b>Telephone Number:</b> | 9702324940                |

| <b>Facility Director</b> |                           |
|--------------------------|---------------------------|
| <b>Name:</b>             | Emily Humphrey            |
| <b>Email Address:</b>    | humphreh@co.larimer.co.us |
| <b>Telephone Number:</b> | 9709802671                |

| <b>Facility PREA Compliance Manager</b> |  |
|---|--|
| <b>Name:</b>                            |  |
| <b>Email Address:</b>                   |  |
| <b>Telephone Number:</b>                |  |

| <b>Facility Characteristics</b>   |                        |
|---|------------------------|
| <b>Designed facility capacity:</b>  | 658                    |
| <b>Current population of facility:</b>  | 393                    |
| <b>Average daily population for the past 12 months:</b>                             | 370                    |
| <b>Has the facility been over capacity at any point in the past 12 months?</b>      | No                     |
| <b>Which population(s) does the facility hold?</b>                                  | Both females and males |
| <b>Age range of population:</b>   | 18+                    |
| <b>Facility security levels/resident custody levels:</b>                            | minimum                |
| <b>Number of staff currently employed at the facility who may have contact with</b> | 253                    |

|  |    |
|--|----|
| <b>residents:</b>  |    |
| <b>Number of individual contractors who have contact with residents, currently authorized to enter the facility:</b> | 87 |
| <b>Number of volunteers who have contact with residents, currently authorized to enter the facility:</b>             | 46 |

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|---------------------------|--|
| <b>AGENCY INFORMATION</b> |  |
|---------------------------|--|

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| <b>Name of agency:</b>                                       | Larimer County Community Justice Alternatives        |
| <b>Governing authority or parent agency (if applicable):</b> |  |
| <b>Physical Address:</b>                                     | 2307 Midpoint Drive, Fort Collins , Colorado - 80525 |
| <b>Mailing Address:</b>                                      |  |
| <b>Telephone number:</b>                                     |  |

|  |  |
|--|--|
| <b>Agency Chief Executive Officer Information:</b> |  |
|--|--|

|                          |  |
|--------------------------|--|
| <b>Name:</b>             |  |
| <b>Email Address:</b>    |  |
| <b>Telephone Number:</b> |  |

|   |  |  |  |
|---|--|--|--|
| <b>Agency-Wide PREA Coordinator Information</b> |  |  |  |
|---|--|--|--|

|              |                  |                       |                           |
|--------------|------------------|-----------------------|---------------------------|
| <b>Name:</b> | Ingrid Schroeder | <b>Email Address:</b> | schroeil@co.larimer.co.us |
|--------------|------------------|-----------------------|---------------------------|

|                                |  |
|--------------------------------|--|
| <b>Facility AUDIT FINDINGS</b> |  |
|--------------------------------|--|

|                                  |  |
|----------------------------------|--|
| <b>Summary of Audit Findings</b> |  |
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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:**

4

- 115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.213 - Supervision and monitoring
- 115.217 - Hiring and promotion decisions
- 115.253 - Resident access to outside confidential support services

**Number of standards met:**

37

**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: | 2024-09-30 |
| 2. End date of the onsite portion of the audit:   | 2024-10-02 |

#### 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<br><input type="radio"/> No  |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated:   | SAVA - Sexual Assault Victim Advocate Center<br>Larimer County Sheriff Office - external reporting entity |

### AUDITED FACILITY INFORMATION

|  |  |
|--|--|
| 14. Designated facility capacity:  | 389  |
| 15. Average daily population for the past 12 months:                             | 389  |
| 16. Number of inmate/resident/detainee housing units:                            | 68   |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><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**

|  |     |
|--|-----|
| <b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>   | 365 |
| <b>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:</b>  | 12  |
| <b>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:</b> | 10  |
| <b>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:</b>  | 12  |
| <b>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:</b>   | 12  |
| <b>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:</b>  | 5   |
| <b>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:</b>   | 5   |

|   |  |
|---|--|
| <p><b>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:</b></p>   | <p>1</p>   |
| <p><b>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:</b></p>   | <p>1</p>   |
| <p><b>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:</b></p>  | <p>8</p>   |
| <p><b>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:</b></p>                                     | <p>0</p>   |
| <p><b>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):</b></p> | <p>Please know physical disability, blind, deaf and hard of hearing clients were 12 in total. Individual numbers were not requested.</p> |
| <p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>   |  |
| <p><b>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:</b></p>   | <p>248</p>   |
| <p><b>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:</b></p>   | <p>46</p>  |

|   |   |
|---|---|
| <p><b>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:</b></p>                        | <p>87</p>   |
| <p><b>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:</b></p> | <p>No text provided.</p>  |
| <p><b>INTERVIEWS</b></p>  |   |
| <p><b>Inmate/Resident/Detainee Interviews</b></p>   |   |
| <p><b>Random Inmate/Resident/Detainee Interviews</b></p>  |   |
| <p><b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>  | <p>13</p>   |
| <p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>   | <p> <input type="checkbox"/> Age<br/> <input type="checkbox"/> Race<br/> <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)<br/> <input type="checkbox"/> Length of time in the facility<br/> <input checked="" type="checkbox"/> Housing assignment<br/> <input checked="" type="checkbox"/> Gender<br/> <input type="checkbox"/> Other<br/> <input type="checkbox"/> None </p> |
| <p><b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>  | <p>The Thursday before the onsite review the facility provided rosters of targeted and random clients, and the auditor randomly chose clients from those lists by target, gender and housing dorm. Once on site some of the clients had been released or were not available due to work schedules and the auditor chose alternates for the same targeted area, housing dorm and gender.</p>     |



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| <b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| <b>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):</b>  | No text provided.  |
| <b>Targeted Inmate/Resident/Detainee Interviews</b>   |  |
| <b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>   | 14   |
| <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> |  |
| <b>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:</b>   | 1  |
| <b>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:</b>  | 3  |

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| <p><b>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:</b></p>   | <p>1</p>  |
| <p><b>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:</b></p>  | <p>0</p>  |
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p> | <p>This targeted category of client did not appear to be in the facility during the onsite review.</p>  |
| <p><b>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:</b></p>   | <p>2</p>  |
| <p><b>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:</b></p>                                     | <p>2</p>  |

|   |   |
|---|---|
| <p><b>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:</b></p>  | <p>1</p>  |
| <p><b>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:</b></p>  | <p>1</p>  |
| <p><b>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:</b></p>   | <p>5</p>  |
| <p><b>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:</b></p> | <p>0</p>  |
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>  | <p>The facility does not utilize segregated housing.</p>  |

|   |                   |
|---|-------------------|
| <b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b> | No text provided. |
|---|-------------------|

**Staff, Volunteer, and Contractor Interviews**

**Random Staff Interviews**

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|---|----|
| <b>71. Enter the total number of RANDOM STAFF who were interviewed:</b> | 12 |
|---|----|

|   |   |
|---|---|
| <b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b> | <input type="checkbox"/> Length of tenure in the facility<br><input checked="" type="checkbox"/> Shift assignment<br><input checked="" type="checkbox"/> Work assignment<br><input checked="" type="checkbox"/> Rank (or equivalent)<br><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)<br><input type="checkbox"/> None |
|---|---|

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| <b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
|--|--|

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|--|---|
| <b>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):</b> | Staff were chosen from shift rosters during the first two days of the onsite review. Four staff were chosen from the first, second and third shifts and all staff were line staff who supervised clients. |
|--|---|

**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.

|   |    |
|---|----|
| <b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b> | 11 |
|---|----|

|  |  |
|--|--|
| <b>76. Were you able to interview the Agency Head?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>78. Were you able to interview the PREA Coordinator?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>79. Were you able to interview the PREA Compliance Manager?</b>                                   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><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 type="checkbox"/> Other  |
| <b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>                           | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| <b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>  | 1   |
| <b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>  | <input type="checkbox"/> Education/programming<br><input type="checkbox"/> Medical/dental<br><input type="checkbox"/> Mental health/counseling<br><input type="checkbox"/> Religious<br><input checked="" type="checkbox"/> Other   |
| <b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>                          | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| <b>a. Enter the total number of CONTRACTORS who were interviewed:</b>   | 1   |
| <b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b> | <input type="checkbox"/> Security/detention<br><input type="checkbox"/> Education/programming<br><input type="checkbox"/> Medical/dental<br><input checked="" type="checkbox"/> Food service<br><input type="checkbox"/> Maintenance/construction<br><input type="checkbox"/> Other |
| <b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>   | No text provided.   |

## 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?**

Yes

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)?**

Yes

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)?**

Yes

No

**87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?**

Yes

No

**88. Informal conversations with staff during the site review (encouraged, not required)?**

Yes

No



|  |                          |
|--|--------------------------|
| <p><b>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).</b></p> | <p>No text provided.</p> |
|--|--------------------------|

**Documentation Sampling**

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><b>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?</b></p> | <p><input checked="" type="radio"/> Yes<br/><input type="radio"/> No</p> |
|--|--|

|   |                          |
|---|--------------------------|
| <p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p> | <p>No text provided.</p> |
|---|--------------------------|

**SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

**Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

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.

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

|                                      | <b># of sexual abuse allegations</b> | <b># of criminal investigations</b> | <b># of administrative investigations</b> | <b># of allegations that had both criminal and administrative investigations</b> |
|--------------------------------------|--------------------------------------|-------------------------------------|---|--|
| <b>Inmate-on-inmate sexual abuse</b> | 2                                    | 0                                   | 2   | 0  |
| <b>Staff-on-inmate sexual abuse</b>  | 2                                    | 0                                   | 2   | 0  |
| <b>Total</b>                         | 4                                    | 0                                   | 4   | 0  |

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

|   | <b># of sexual harassment allegations</b> | <b># of criminal investigations</b> | <b># of administrative investigations</b> | <b># of allegations that had both criminal and administrative investigations</b> |
|---|---|-------------------------------------|---|--|
| <b>Inmate-on-inmate sexual harassment</b> | 5   | 0                                   | 5   | 0  |
| <b>Staff-on-inmate sexual harassment</b>  | 1   | 0                                   | 1   | 0  |
| <b>Total</b>                              | 6   | 0                                   | 6   | 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 |
|--------------------------------------|---------|--------------------------|----------------------------|------------------------|-----------|
| <b>Inmate-on-inmate sexual abuse</b> | 0       | 0                        | 0                          | 0                      | 0         |
| <b>Staff-on-inmate sexual abuse</b>  | 0       | 0                        | 0                          | 0                      | 0         |
| <b>Total</b>                         | 0       | 0                        | 0                          | 0                      | 0         |

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

|                                      | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual abuse</b> | 0       | 0         | 1               | 1             |
| <b>Staff-on-inmate sexual abuse</b>  | 0       | 0         | 0               | 2             |
| <b>Total</b>                         | 0       | 0         | 1               | 3             |

### 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 |
|---|---------|--------------------------|----------------------------|------------------------|-----------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0                        | 0                          | 0                      | 0         |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 0                        | 0                          | 0                      | 0         |
| <b>Total</b>                              | 0       | 0                        | 0                          | 0                      | 0         |

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

|   | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|---|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0         | 4               | 0             |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 0         | 1               | 0             |
| <b>Total</b>                              | 0       | 0         | 5               | 0             |

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

|  |   |
|--|---|
| <b>98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b> | 4 |
|--|---|

|   |   |
|---|---|
| <p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></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 sexual abuse investigation files)</p>                  |
| <p><b>Inmate-on-inmate sexual abuse investigation files</b></p>   |   |
| <p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>  | <p>2</p>  |
| <p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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><b>Staff-on-inmate sexual abuse investigation files</b></p>  |   |
| <p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>   | <p>2</p>  |
| <p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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 staff-on-inmate sexual abuse investigation files)</p>  |

|   |  |
|---|--|
| <p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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 staff-on-inmate sexual abuse investigation files)</p>       |
| <p><b>Sexual Harassment Investigation Files Selected for Review</b></p>   |  |
| <p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>  | <p>6</p>   |
| <p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></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 sexual harassment investigation files)</p>                  |
| <p><b>Inmate-on-inmate sexual harassment investigation files</b></p>  |  |
| <p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>   | <p>5</p>   |
| <p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></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><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></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> |

| <b>Staff-on-inmate sexual harassment investigation files</b>   |  |
|--|--|
| <b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>  | 1  |
| <b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>  | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| <b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| <b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>  | No text provided.  |
| <b>SUPPORT STAFF INFORMATION</b>   |  |
| <b>DOJ-certified PREA Auditors Support Staff</b>   |  |
| <b>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.</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| <b>a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:</b>  | 1  |

## Non-certified Support Staff

**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.**

Yes

No

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. Who paid you to conduct this audit?**

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other



| <b>Standards</b>   |
|--|
| <p><b>Auditor Overall Determination Definitions</b></p> <ul style="list-style-type: none"> <li>• Exceeds Standard<br/>(Substantially exceeds requirement of standard)</li> <li>• Meets Standard<br/>(substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard<br/>(requires corrective actions)</li> </ul>   |
| <p><b>Auditor Discussion Instructions</b></p> <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> |

| <b>115.211</b> | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |
|----------------|---|
|                | <p><b>Auditor Overall Determination:</b> Exceeds Standard</p>   |
|                | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives Organizational Chart, dated 4.19.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> </ol> |

3. Community Justice Specialists
4. Administrative Personnel
5. PREA Manager
6. Program Manager / PREA Coordinator
7. Assistant Director of Operations
8. Director of Community Justice / Head of Agency

Through interviews with clients and staff and review of client and personnel files, review of facility and agency protocols and a facility tour, it is evident that this facility interweaves requirements of PREA in their daily protocols. Both clients and staff could speak to facility PREA practices and protocols being used as is described in the agency's PREA Policy.

Client interviews resulted in the following unsolicited comments regarding the facility and personnel.

- Feel very, very safe.
- 100% of clients asked if they felt safe in the facility yielded a yes response.
- Everyone here is really nice.
- Feel staff take PREA very seriously here.
- Staff really good to us, always checking in on us and very caring.
- The facility responded quickly and appropriately when I reported.

Staff interviews resulted in the following unsolicited comments regarding the agency.

- Have a PREA Team and those members choose to be on the team.
- Staff want to make sure clients feel safe and are comfortable here.

Site Observation:

During the tour, multiple informal interviews were conducted with clients and personnel. Informal interviews with clients demonstrated they were aware of PREA and how to report through information posted in the facility; however, most stated they would report to staff or families. Formal interviews with clients demonstrated they were aware of the PREA Team member names, and names being posted on

dayroom bulletin boards. Both Auditors observed many positive interactions between personnel and clients throughout the onsite review.

During the tour of the facility, the Auditor witnessed standardized PREA bulletin boards in hallways and client dayrooms with the following information in English and Spanish:

- Sexual Abuse and Sexual Harassment facility postings with internal and external contact names, addresses and phone numbers.
- SAVA advocate brochures with address and phone number information.
- Audit Notices were observed at all facility entrances and exits.

The facility has multiple cameras through each building where clients reside. Cameras were viewed in the Community Justice Specialist work areas and all cameras appeared to be clear and in working order.

(a) The Larimer County Community Justice Alternatives PAQ states the agency Safe Prisons/PREA Plan mandates zero-tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract.

Larimer county Community Justice Alternatives PREA Policy, page 3, section 1. PREA Staff Responsibilities, A., states, "The CJA PREA Coordinator is responsible for oversight of all PREA related activities. The PREA Coordinator shall:

1. Coordinate and develop policies and procedures to identify, monitor, and track sexual abuse and sexual harassment incidents occurring in CJA facilities and programs.
2. Maintain related statistics.
3. Oversee administrative PREA investigations."

(b) The Larimer County Community Justice Alternatives PAQ states the agency employs or designates an upper-level, agency-wide PREA Coordinator. The position of the Program Manager / PREA Coordinator in the agency's organizational structure as the Program Manager / PREA Coordinator.

Through such reviews of the agency PREA Team with multiple members, investigators, PREA Managers and the agency detail to PREA client and personnel

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|  | awareness, the facility exceeds the standard requirements. |
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| <b>115.212</b> | <b>Contracting with other entities for the confinement of residents</b>   |
|----------------|---|
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Program Manager / PREA Coordinator</li> </ol> <p>The interview with the PREA Coordinator demonstrated the agency does not contract for confinement services.</p> <p>(a-b) The Larimer County Community Justice Alternatives PAQ states the agency does not contract for confinement services of their residents.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

| <b>115.213</b> | <b>Supervision and monitoring</b>  |
|----------------|--|
|                | <b>Auditor Overall Determination:</b> Exceeds Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives 2024 Annual Staffing Plan Review, dated 6.24.2024</li> <li>4. Larimer County Daily Shift Logs</li> </ol> |

Interviews:

1. Community Justice Specialists
2. Director of Community Justice / Head of Agency

The interview with Community Justice Specialists demonstrated rounds are conducted unannounced through randomly walking through all areas of the facility and observing clients and staff, making sure all are safe and in appropriate locations. Unannounced facility checks are documented on each shift, at unscheduled times and in the agency database as 'Walk Throughs' demonstrating rounds are completed two to seven times in each 24-hour period.

The interview with the Director of Community Justice demonstrated she provides input on the annual staffing plan analysis in tandem with the PREA Coordinator, facility Directors and the PREA Team. The facility has completed an addition, remodel and additional cameras since the last audit and discussions were held in length to ensure the safety of the clients and personnel were the priority before and during construction.

Site review observation:

The facility provided documentation of written unannounced rounds and a database report demonstrating unannounced facility checks are completed multiple times per each 24-hour period. The facility tour demonstrated multiple camera coverage throughout dayrooms, hallways and mirror placement in client dorms, classrooms and in some offices where clients meet with case managers.

Recommendation:

Institute a documented communication system for staff who meet with clients outside of camera view.

(a) The Larimer County Community Justice Alternatives PAQ states the agency requires the facility to 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 residents against abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of clients is 397. The average daily number of clients on which the staffing plan was predicated is 723.

The facility provided a Larimer County Community Justice Alternatives 2024 Annual Staffing Plan Review. The plan documents the following information.

1. Assessment of Needs
  - a. Campus description and client population.
  - b. Prevalence of Substantiated and unsubstantiated PREA allegations.
  - c. Other relevant factors
  - d. Regulatory Agencies
  - e. Findings of Inadequacy
  - f. Staff Schedules
  - g. Video surveillance
2. Documentation of relief and compliance with the plan.
  - a. Documentation
  - b. Planned and Unplanned Time Off
  - c. Staffing Plan Deviations
3. Staffing plan deviations.
4. Staffing Plan reviews and updates

The plan is signed and dated by the Director of Community Justice Alternatives, the Director of Community Corrections, the Director of Alternative Sentencing and the PREA Coordinator.

(b) The Larimer County Community Justice Alternatives PAQ states each time the staffing plan is not complied with, the facility documents and justifies deviations.

(c) The Larimer County Community Justice Alternatives PAQ states at least once every year the facility/agency, in collaboration with the PREA coordinator, reviews the staffing plan to whether adjustments are needed in (a) the staffing, (b) the deployment of monitoring technology, or (c) the allocation of agency/facility resources to commit to the staffing plan to ensure compliance with the staffing plan. The facility completes an annual staffing plan review.

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|  | <p>The facility provided random Daily Shift Logs demonstrating deviations from the staffing plan are documented.</p> <p>Through reviews of the facility documenting multiple unannounced facility checks, which is not a requirement for community confinement facilities, the facility exceeds the standard requirements.</p> |
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| <b>115.215</b> | <b>Limits to cross-gender viewing and searches</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives Client Searches Policy 1.00.130.109, dated 5.21.2024</li> <li>3. Larimer County Community Justice Alternatives Facility Monitoring Policy, dated 4.4.2023</li> <li>4. Larimer County Community Justice Alternatives Client Gender Identity Policy 1.00.140.103, dated 1.29.2024</li> <li>5. Searches / Contraband Training PowerPoint Presentation, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> <li>3. Community Justice Specialists</li> <li>4. PREA Managers</li> <li>5. Program Manager / PREA Coordinator</li> </ol> <p>Interviews with clients demonstrated cross gender announcements were made each time an opposite gender staff member enters a restroom by knocking, being very loud about announcing, then waiting a few seconds before entering, allowing ample time for clients to get dressed. Clients stated typically only same gender staff enter</p> |

the restroom. 100% of clients asked if searches and drug tests were conducted respectfully by staff, and each stated yes. Clients stated staff always tell us verbally what part of our body they are touching before they touch us. The transgender client stated she had been in the facility once before but did state her search preference was requested and approved upon admittance.

Interviews with Community Justice Specialists demonstrated each had been trained in cross gender searches as well as transgender pat search protocols and the agency does not perform strip searches. Pat searches are completed by asking clients to empty their pockets, patting the client body over clothing and looking through their backpacks. Interviews with Community Justice Specialists demonstrated cross gender announcements are completed each time an opposite gender staff member enters a dormitory restroom by knocking, announcing their name or gender, waiting a couple seconds and then entering. Community Justice Specialists stated they ask transgender and intersex clients their search preference upon admission and that preference is honored throughout their stay in the program.

Site Review Observation:

During the tour each time a restroom was entered a cross-gender announcement was completed. During the tour the search area was observed to be in the Community Justice Specialist work area, under camera view. Several searches were observed, and each appeared to be respectful and in an area with a camera. The drug test area was observed to be in a bathroom near the check-in desk area near the employment lab. The bathroom does not have cameras and staff close the door while the client is providing urine samples.

(a) Larimer County Community Justice Alternatives PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their residents. In the past 12 months zero cross-gender strip or cross-gender visual body cavity searches of residents.

(b) Larimer County Community Justice Alternatives PAQ states the facility does not permit cross-gender pat-down searches of female residents, absent exigent circumstances. The number of pat-down searches of female residents that were conducted by male staff is zero. The number of pat-down searches of female residents conducted by male staff that did not involve exigent circumstance(s) was zero.



(c) Larimer County Community Justice Alternatives PAQ states the facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified.

Larimer County Community Justice Alternatives Client Searches Policy, page 3, section III., states, “. All searches performed will be documented in the computer system in the client file according to the respective department’s procedures.”

(d) Larimer County Community Justice Alternatives PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, 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 (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing.

Larimer County Community Justice Alternatives Facility Monitoring Policy, page 3, section 6., states, “In normal non-emergency circumstances, CJA staff shall announce their presence when entering a residential bathroom area of a different gender.”

(e) The Larimer County Community Justice Alternatives PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex Resident for the sole purpose of determining the Resident’s genital status. Such searches have not occurred in the past 12 months.

Larimer County Community Justice Alternatives Client Gender Identity Policy, page 2-3, section Searches, states, “In the case of a pat search, when a client alerts staff or staff is aware that they are gender diverse, the search is conducted by a staff member of the gender requested by the client and in accordance with standard search policy and procedure. At no time shall a search of a client's person be used for the sole purpose of determining that client's gender or genital status. When possible, searches should be conducted within a camera view.”

(f) The Larimer County Community Justice Alternatives PAQ states 100% of security staff at each facility receive training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and

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|  | <p>respectful manner consistent with security needs.</p> <p>The facility provided a Searches / Contraband Training PowerPoint Presentation. Page 6, Transgender Searches educates personnel on the following instruction.</p> <ul style="list-style-type: none"> <li>· The transgender client has the option of choosing which gender of staff they are comfortable with searching them. Either or, but not both and it does not change depending on the offender's mood.</li> <li>· This is about the identity of the client.</li> <li>· If the offender is male changing into a female, the offender can lift up the bra through the shirt. The search from the waist down remains the same.</li> </ul> <p>Through such reviews, the facility meets the standard requirements.</p> |
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|----------------|---|
| <b>115.216</b> | <b>Residents with disabilities and residents who are limited English proficient</b>   |
|                | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer county Community Justice Alternatives PREA Policy 1.00.140.101, dated 4.22.2024</li> <li>3. Voiance Language Services Contract, dated 11.19.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Clients</li> <li>2. Community Justice Specialist</li> </ol> <p>Interviews with targeted clients to include one visually challenged, three cognitively delayed and one LEP client (spoke English fluently) demonstrated each had been educated on PREA through staff reviewing information with them.</p> |

Interviews with all Community Justice Specialists demonstrated each completes intake education with clients during the intake process. Community Justice Specialists stated clients are taken into a room where they watch the PREA video and are asked to sign the PREA acknowledgement once the agency zero tolerance policy is explained to them. In addition, clients are provided PREA education quarterly through the PREA video and review of the agency PREA brochure.

(a) The Larimer County Community Justice Alternatives PAQ states the agency has established procedures to provide disabled residents equal opportunities to be provided with and learn about the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment.

Larimer county Community Justice Alternatives PREA Policy, page 6-7, section III. Client Access to PREA Information and Reporting (Disabilities and Limited English) A. -B., state,

A. "CJA shall take appropriate steps to ensure that residents with disabilities and/or limited English shall have equal opportunity to benefit from CJA efforts to prevent, detect, and respond to sexual abuse and sexual harassment in its facilities. These steps shall include but are not limited to:

1. Providing appropriate communication services. In normal, non-emergency circumstances, CJA shall furnish appropriate auxiliary aids or services within the guidelines of the ADA (Americans with Disabilities Act) to requesting individuals who have auditory or speech limitations for any necessary communication. An accompanying adult (visitor) or resident (client) may interpret only in an emergency involving an imminent threat to the safety or welfare of an individual or the public when a qualified interpreter is not immediately available.

2. All PREA-related material and information for clients will be provided in formats or through methods that ensure effective communication with clients with disabilities or any degree of illiteracy which may preclude the client from fully understanding the content of written PREA materials. Residents and clients shall not be used for this purpose.

B. If providing such services will result in a fundamental alteration of the nature of services or programs provided to the client population, or causes undue financial or administrative burdens to CJA, all reasonable efforts will be made to comply with PREA's intent to the best of the CJA's ability while giving due concern to such circumstances. When requested or needed, staff shall contact a supervisor to access a qualified interpreter service. Language translation shall be provided at no cost to the client."

(b) The Larimer County Community Justice Alternatives PAQ states the agency

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|  | <p>has established procedures to provide residents with limited English 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.</p> <p>The facility provided a Voiance Language Services Contract. The contract terms are automatic renewal each year unless terminated with a 30 day written notice.</p> <p>(c) The Larimer County Community Justice Alternatives PAQ states the agency prohibits the use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.64, or the investigation of the resident's allegations. In the last 12 months the facility has had zero instances where residents were used for interpreters. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |
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| <b>115.217</b> | <b>Hiring and promotion decisions</b>  |
|                | <b>Auditor Overall Determination:</b> Exceeds Standard   |
|                | <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives Hiring Policy 1.00110.154, dated 7.23.2015</li> <li>3. Larimer County Community Justice Alternatives Transfer, Leadership, &amp; Career Path Opportunities Policy 1.00.110.153, dated 7.16.2024</li> <li>4. Larimer County Community Justice Alternatives Contract Workers Policy 1.00.110.159, dated 6.25.2014</li> <li>5. Larimer County Community Justice Alternatives Personnel Records Policy 1.00.110.152, dated 9.29.2021</li> <li>6. Larimer County Community Justice Alternatives Pre-Employment Integrity Interview, dated 12.2023</li> </ol> |

7. Larimer County Community Justice Alternatives Employee Authorization to Release PREA Information, dated 11.2023

8. Larimer County Community Justice Alternatives Letter of Interest - Internal Career Opportunities, dated 1.2023

9. Larimer County Community Justice Alternatives PREA Inquiry Form - Prior Institutional Employers, dated 1.2023

Interviews:

1. Hiring Supervisor

The interview with the Hiring Supervisor demonstrated all applicants, contractors and volunteers' complete administrative adjudication questions and criminal history background checks upon hire, promotion and or contracts for services and every four years thereafter. Institutional reference checks are completed for each applicable applicant and when a written request is received, and institutional reference check information is provided to PREA compliant facilities. The Hiring Supervisor stated she is made aware of employee criminal activity through Colorado Cohorts Colorado State Courts data access and the National Institution of Corrections. Volunteers and contractors, as was the PREA Auditors, are notified through Smartsheet's to complete required agency trainings to include PREA education. Personnel, volunteers and contractors have a requirement to report all incidents of sexual harassment and sexual assault within 24 hours of occurrence.

Site Observation:

By utilizing the PREA Audit Community Confinement Facilities - Documentation Review Employee File/Records template, 22 of 22 employee files reviewed had background checks upon hire and every four years, thereafter. The facility was able to demonstrate administrative adjudication questions were asked during the hiring and promotion processes and institutional references were requested and completed for applicable applicants. During the onsite review, the Hiring Supervisor provided additional documentation to include the following forms demonstrating the agency has sound agency hiring practices in place.

- PREA Inquiry Form - Prior Institutional Employers
- Letter of Interest - Internal Career Opportunities
- Employee Authorization to Release PREA Information

(a) The Larimer County Community Justice Alternatives PAQ states the agency policy prohibits hiring or promoting anyone who may have contact with residents

and prohibits enlisting the services of any contractor who may have contact with residents who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Larimer County Community Justice Alternatives Hiring Policy, page 2, section I. Posting, Applications & Interviews, third paragraph, states, "In accordance with the Prison Rape Elimination Act (PREA), all positions posted for application, whether internal or external, shall screen applicants for a history of sexual misconduct in the workplace and in the community. These questions are covered in the application and/or integrity interview process and shall be "yes" or "no" questions. Any "yes" answer that indicates a history of such misconduct shall automatically disqualify the applicant from employment with the agency."

Larimer County Community Justice Alternatives Transfer, Leadership, & Career Path Opportunities Policy, page 1, section Policy, states, "Employment practices of Larimer County are established and implemented on a non-discriminatory merit basis. Employees are hired and advanced through open competition based on qualification and potential for quality job performance and overall job-person fit. For position changes within CJA (Leadership, Career Path, Voluntary Demotions) CJA recognizes an employee's time in job when determining pay adjustments, avoiding reduction of pay whenever possible in accordance with HR Policy 331.5R. Pursuant to Prison Rape Elimination Act (PREA) standards, candidates shall be reviewed for criminal history and any incidents of sexual misconduct prior to receiving a transfer or promotion."

The facility provided a Larimer County Community Justice Alternatives Pre-Employment Integrity Interview. Page seven requires applicants to answer the following questions.

1. Have you ever engaged in sexual abuse or misconduct in a prison, jail, lock-up, community confinement facility, juvenile facility, or other institution?
2. Have you ever been convicted of engaging or attempting to engage in sexual activity in the community that was facilitated by force, overt or implied acts of force, coercion, or if the victim did not consent or was not capable of consenting or refusing?
3. Have you ever been adjudicated in a civil case or an administrative hearing (at

work or elsewhere) where you were found guilty of, or admitted to, any or all of the actions described in the previous two questions?

4. Have you ever engaged in sexual harassment in the workplace or community?

5. Have you ever been investigated criminally or administratively for sexual harassment in the workplace or community?

(b) The Larimer County Community Justice Alternatives PAQ states agency policy requires the consideration of any incidents of sexual harassment when determining to hire and or promote anyone, or to enlist services of any contractor, who may have contact with residents.

Larimer County Community Justice Alternatives Hiring Policy, page 6-7, section 9., second paragraph, states, "Based on the results of the investigation, the Background Investigator shall make a recommendation as to whether the candidate is recommended or not recommended for further employment consideration. The Hiring Supervisor reviews the recommendations and supporting documentation, and either supports the recommendation, requests additional information, or disagrees. If the Hiring Supervisor is not available, or the Hiring Supervisor conducted the background, the background shall be reviewed by the Business Operations Manager. The Hiring Supervisor shall forward all backgrounds to be reviewed by the Department or CJA Director for a final decision prior to making the offer of employment unconditional."

(c) The Larimer County Community Justice Alternatives PAQ states agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months, the number of people hired who may have contact with residents who have had criminal background record checks was 62.

Larimer County Community Justice Alternatives Hiring Policy, page 3, section Application Screening/Assessments, second paragraph, states, "Once candidates are selected to proceed to Integrity and Oral Board Interviews, the Hiring Supervisor contacts the candidates to schedule these interviews and informs each candidate that a Criminal History check will be run before they arrive at their interview appointment. The Hiring Supervisor shall inform candidates that if they do not pass the Integrity Interview, they will not proceed to the Oral Board phase. Candidates shall also be informed that reasons for not passing an Integrity Interview are not

disclosed. The Hiring Supervisor, Business Operations Manager or Director-approved designee runs Criminal History, Warrant, and Driver History Checks in CCIC/NCIC and Person Search in Colorado Courts Data Access (PAS). Information obtained from these checks is provided to the Integrity Interviewers to discuss with the candidates during the Integrity Interview and then evaluated according to established criteria within the interview guidelines. If the results of an applicant's criminal history produce information that may disqualify them for employment with CJA, the Hiring Supervisor will review the information with the Lead Integrity Interviewer prior to scheduling them for an interview. In the event an applicant does not progress to an interview due to their criminal history, the applicant has the ability to contest their criminal history results and will be allowed to participate in the interview process pending results of their contestation. It is the candidate's responsibility to provide proof of an inaccurate criminal history."

(d) The Larimer County Community Justice Alternatives PAQ states the agency policy requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with residents. In the past 12 months there were 62 contracts for services where criminal background record checks were conducted on all contractors covered in the contract who might have contact with residents.

Larimer County Community Justice Alternatives Contract Workers Policy, page 1, section Policy, states, "In support of the safety and security of CJSD facilities, employees, and offenders; Contract Workers that perform duties within CJSD facilities or on CJSD grounds shall be screened for criminal histories and sexual misconduct."

(e) The Larimer County Community Justice Alternatives PAQ states the agency requires background checks to be completed every five years.

Larimer County Community Justice Alternatives Personnel Records Policy, page 3, section III. Confidential Files, first two paragraphs state, "Due to the nature of confidential paperwork, certain information will be retained as confidential from the individual employee. This confidential information will be kept in a folder labeled clearly as "Confidential from Employee" and kept with/beside the Departmental Personnel File. Items to be kept in this Confidential File include pre-hire testing results, integrity interviews, oral board notes and scores, background investigations, criminal histories, and pre-hire polygraphs. Criminal history checks are performed as part of the pre-hire screening process and, at a minimum, once every four years for those already employed with CJS.



For CJS Victim Services positions, a Determination of Suitability to interact with participating minors is performed as part of the pre-hire screening process and, at a minimum, once every four years for those already employed or are volunteer(s) or intern(s) with CJS Victim Services. (See CJS Hiring Policy #1.00.110.154 Section II.7.) CJS shall reexamine covered individuals' suitability determination considering the search results, and if appropriate, modify or withdraw that determination. The determination of suitability shall also be reexamined upon learning of information that reasonably may suggest unsuitability and, if appropriate, modify or withdraw that determination."

(g) The Larimer County Community Justice Alternatives PAQ states that agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

Larimer County Community Justice Alternatives Hiring Policy, page 1, section Specific Requirements, last paragraph states, "Any material omission or the provision of materially false information by a candidate during the hiring process is grounds for negative termination of the candidate's application. If the material omission and/or materially false information is discovered during employment, it will be cause for corrective or adverse action consistent with Larimer County Policy and Procedures."

Through such reviews of the extensive hiring practices to ensure applicants have not been involved in sexual abuse and the agency completing criminal background checks on every employee, volunteer and contractor every four years, the facility exceed the standard requirements.

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| <b>115.218</b> | <b>Upgrades to facilities and technology</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | Document Review: <ul style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Camera Email Communications</li> </ul> |

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|  | <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Director of Community Justice / Head of Agency</li> </ol> <p>Interviews with agency Director demonstrated the agency has acquired a new facility by expanding a building for women’s programming, made modifications to male dorms by removing most jack and jill bathrooms and many cameras have been added indoors and to newly outdoor recreational areas.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states the facility has made substantial expansions or modifications to existing facilities since the last PREA audit.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states the facility has installed electronic surveillance system since the last PREA audit.</p> <p>The facility provided email communications clarifying estimated times of installation for camera additions for the modified building.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |
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| <b>115.221</b> | <b>Evidence protocol and forensic medical examinations</b>  |
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|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Memorandum of Understanding Sexual Assault Victim Advocate Center, dated 8.17.2023</li> <li>4. Memorandum of Understanding Larimer County Sheriff, dated 11.21.2021</li> <li>5. Qualified Staff Resumes</li> </ol> |

Interviews:

1. Program Manager / PREA Coordinator

The interview with the PREA Coordinator demonstrated clients would be taken to UC Health for forensic exams and victims would be provided advocacy services through agency victim assistants or the local Sexual Abuse Victim Advocacy agency.

(a) The Larimer County Community Justice Alternatives PAQ states the facility is responsible for conducting administrative sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The agency/facility is not responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). If another agency has responsibility for conducting either administrative or criminal sexual abuse investigations, the name of the agency that has responsibility is the Larimer County Sheriff's Office.

Larimer County Community Justice Alternatives PREA Policy, page 10, section VII. First Response / Investigative Protocols, C. states, "CJA shall ensure that standard evidence protocols are met anytime that a crime scene, victim, or perpetrator may have usable evidence pertinent to an investigation of alleged sexual abuse or sexual harassment. These protocols are outlined in the PREA training session, and in the First Responder Manual."

(b) The Larimer County Community Justice Alternatives PAQ states the protocol is not developmentally appropriate for youth. The protocol was adapted from or otherwise based on the most recent edition of the DOJ'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.

(c) The Larimer County Community Justice Alternatives PAQ states the facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic examinations are offered at no cost to the victim. Where possible, all examinations are conducted by SAFE or SANE examiners. The number of forensic exams conducted during the past 12 months is zero.

Larimer County Community Justice Alternatives PREA Policy, page 8, section V. Victim Services, A. 1. a-b., state,

a. Any Forensic Medical Examination shall be conducted in a facility and by

personnel following Sexual Assault Nurse Examiner (SANE) protocols. To this end, Medical Center of the Rockies shall be the exclusive provider of SANE services to CJA.

b. This service will be made available at no cost to victims. According to C.R.S. 18-3-407.5 (l) and (3Xb), if the incident is reported to law enforcement, that law enforcement agency will pay, if the victim refuses to cooperate with law enforcement, the Division of Criminal Justice will pay for Mental health crisis intervention and treatment.”

The website for UC Health yields information stating “24/7 services are received in south Fort Collins, Colorado. The Forensic Nurse Examiner Program at UCH – Anschutz is a comprehensive medical forensic program, founded in 2017.

(d) The Larimer County Community Justice Alternatives PAQ states the facility attempts to make a victim advocate from a rape crisis center available to the victim, in person or by other means. All efforts are documented. If a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff or community member.

The facility provided a Memorandum of Understanding (MOU) between Larimer County Community Justice Alternatives and Sexual Assault Victim Advocate Center. The purpose of this MOU is to provide victim advocacy and confidential reporting services for clients of LCCJA in adherence to Prison Rape Elimination Act (PREA) Standards. The term of this MOU is in effect until 8.31.2028 and is signed by the Larimer County Community Justice Alternatives Director and the Sexual Assault Victim Advocate Center Executive Director on 8.17.2023.

(e) The Larimer County Community Justice Alternatives PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

Larimer County Community Justice Alternatives PREA Policy, page 3, section Victim Witness Specialist, states, “A trained in house staff member responsible for filling out the SART form with the reported victim and providing support to them throughout the PREA investigation. Provides the reporting victim with appropriate community resources and referrals and assists with any coordination of those services.”

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|  | <p>The facility provided two in house advocate resumes, each demonstrating both have complete adequate education in victim advocacy.</p> <p>(f, g, h) The Larimer County Community Justice Alternatives PAQ states the agency is responsible for investigating administrative or criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.21 (a) through (e) of the standards.</p> <p>The facility provided a Memorandum of Understanding between Larimer County Criminal Justice Services and the Larimer County Sheriff. Section II, D., states, “To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution.”</p> <p>Through such reviews, the facility meets the standard requirements.</p> |
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| <b>115.222</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |
|                | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>Larimer County Community Justice Alternatives PAQ</li> <li>Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Community Justice Specialists</li> <li>Case Manager / Investigator</li> <li>Program Manager / PREA Coordinator</li> </ol> <p>Interviews with all staff demonstrated each would contact their immediate</p> |

supervisor and a member of the PREA Team with any information regarding sexual harassment and sexual abuse.

The interview with the Investigator demonstrated he would investigate all allegations of sexual harassment, the PREA Team would make decisions on referring PREA incidents to law enforcement for criminal investigations, regardless of the source of the investigation.

Interviews with the PREA Coordinator demonstrated all allegations of sexual harassment and sexual abuse are investigated and she keeps a detailed spreadsheet of investigations.

Site Observation:

The facility had four sexual harassment and six sexual abuse investigations in the past 12 months. The source of allegations was reported directly to staff, from staff searches of cell phones, a client report as a third party, voicemail on the hotline, and staff observations.

(a) The Larimer County Community Justice Alternatives PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had 10 allegations of sexual abuse and sexual harassment. Seven investigations resulted in an administrative investigation and three were referred for criminal investigation.

Larimer County Community Justice Alternatives PREA Policy, page 1, section Policy, states, "Community Justice Alternatives (CJA) has zero tolerance for sexual abuse and sexual harassment toward clients. CJA recognizes clients who have experienced sexual abuse and sexual harassment by other clients or staff as crime victims. CJA strictly prohibits such conduct and shall immediately respond to allegations, fully investigate reported incidents, pursue disciplinary action, and refer for investigation and prosecution of those who engage in such conduct."

(b) The Larimer County Community Justice Alternatives PAQ states the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. The agency's policy

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|  | <p>regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website at PREA Information &amp; Reporting   Larimer County</p> <p style="text-align: center;">Larimer County Community Justice Alternatives PREA Policy, page 4, section D. Investigations, 1., states, "Criminal Investigations shall be conducted by the Larimer County Sheriff s Office (LCSO), as outlined in the MOU between CJA and LCSO."</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.231</b> | <b>Employee training</b>   |
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|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives Training Policy 1.00.110.303, dated 4.10.2023</li> <li>3. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>4. Community Justice Alternatives 2023 PREA Refresher Information PowerPoint Presentation</li> <li>5. Larimer County PREA Employee - Intern - Volunteer - Contractor Agreement, dated 6.2022</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Community Justice Specialists</li> </ol> <p>Interviews with staff demonstrated each were aware of and received initial and annual PREA education either in person with the PREA Coordinator and or through the agency learning management system and each are notified of required PREA trainings through the agency Smartsheet's database. Community Justice Specialists could describe their role in prevention, detection, reporting and response to sexual harassment and sexual abuse; however, many were unaware of preservation of evidence steps.</p> |

Site Observation:

Utilization of the PREA Audit Community Confinement Documentation Review Employee File / Records Review template and the facility training spreadsheet demonstrated, 22 of 22 employee training files demonstrate annual training had been completed in 2023 and refresher training in 2024, thus far.

Recommendation:

Provide employees with awareness training regarding evidence preservation.

(a) The Larimer County Community Justice Alternatives PAQ states the agency trains all employees who may have contact with residents on the agency's zero-tolerance policy for sexual abuse and sexual harassment. On the PAQ, the PREA Coordinator stated, "We have a set curriculum for in person and virtual training as well as a recording on a YouTube so it can be readily available."

Larimer County Community Justice Alternatives Training Policy, page 3, section \*PREA / Sexual Assault Awareness Training, states, "All CJA employees shall receive the Full 10-Topic Prison Rape Elimination Act (PREA) training, as described in PREA Standards, prior to completion of initial/field training and prior to unsupervised contact with clients. All CJA interns, volunteers and service providers who have contact with clients in a CJA facility shall receive PREA training that is based on the level of contact they have with clients in the facility, which will include a review of the CJA PREA Policy (#1.00.140.101), notification of CJA's zero-tolerance policy regarding sexual abuse and sexual harassment, informing them of their obligation to report, and information on how to report such incidents. All CJA staff/workers shall receive refresher training annually. Upon completion of each PREA training, all CJA staff/workers in attendance shall sign an acknowledgement that they understand the training that they have received."

Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, page 11, section VIII. A. states, "A Comprehensive PREA Training Course shall be conducted for all CJA Workers or other persons having direct, unsupervised contact with clients. All CJA Workers shall sign the PREA Employee-Intern-Volunteer-Service provider Acknowledgement (Form #LCCJA40) and receive documented PREA training upon hire and annually thereafter. Training will include but is not limited to the following:

1. Review of this policy
2. Prevention, investigation, and prosecution of sexual abuse and sexual



harassment

3. Recognition of sexual abuse/harassment, predatory clients, potential victims, and/or staff involvement
4. Facility procedures on sharing confidential information
5. Reporting procedures
6. A client's right to be free from sexual abuse and sexual harassment
7. Client and employee rights to be free from retaliation for reporting sexual abuse
8. Dynamics of sexual abuse in confinement
9. Common reactions of sexual abuse victims"

The facility provided a Community Justice Alternatives 2023 PREA Refresher Information PowerPoint presentation. The presentation includes the following training information.

- Purpose and Scope
- Goals and Objectives
- Introductions
- Factors That Affect Safety
- Why Culture Matters
- Staff Behavior
- Professional Communications and Conduct Tips
- LGVTQI Specific Tips
- Sexual Abuse Includes
- Voyeurism Is Not Accidental
- Sexual Harassment Includes
- Repeated and Unwelcome
- Be On The Lookout
- Signs of Possible Victimization
- Zero Tolerance

- Obligation to Report
- It's Wrong, and It's Illegal
- Maintaining Professional Boundaries
- Behaviors / Actions to Avoid
- Warning Signs
- Reporting an Incident
- First Responder
- Other Types of Reports

(b) The Larimer County Community Justice Alternatives PAQ states training is tailored to the gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. The PAQ states, "All employees receive gender responsive training."

(c) The Larimer County Community Justice Alternatives PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements annually.

(d) The Larimer County Community Justice Alternatives PAQ states the agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification

The facility provided a Larimer County PREA Employee - Intern - Volunteer - Contractor Agreement. The agreement states the following. "I, \_\_\_\_\_ (print name), have received a copy, or I have accessed an electronic copy via the CRJS Division (S:) drive on the shared computer network (S:\CJA\POLICIES & PROCEDURES\CJA POLICIES & PROCEDURES) of Community Justice Alternatives (CJA) Policy #1.00.140.101 PREA. I have read, or had this policy read to me, and I understand the terms and directives therein. I have attended the CJA PREA staff training and I understand the content of this training."

Through such reviews, the facility meets standard requirements.

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| <b>115.232</b> | <b>Volunteer and contractor training</b>   |
|                | <p data-bbox="280 188 981 224"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="280 264 564 300"><b>Auditor Discussion</b></p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1484 860" style="list-style-type: none"> <li data-bbox="280 412 1086 448">1. Larimer County Community Justice Alternatives PAQ</li> <li data-bbox="280 483 1484 564">2. Community Justice Alternatives 2024 CJA Service Provider/Volunteer PowerPoint Presentation</li> <li data-bbox="280 600 1442 680">3. Larimer County PREA Employee - Intern - Volunteer - Contractor Agreement, dated 6.2022</li> <li data-bbox="280 716 1137 752">4. Post Audit: Volunteer PREA Acknowledgment, not dated</li> <li data-bbox="280 788 1398 860">5. Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024</li> </ol> <p data-bbox="280 967 437 1003">Interviews:</p> <ol data-bbox="280 1039 884 1218" style="list-style-type: none"> <li data-bbox="280 1039 852 1075">1. Contractor - Food Services Director</li> <li data-bbox="280 1111 727 1146">2. Volunteer - Room For Help</li> <li data-bbox="280 1182 884 1218">3. Program Manager / PREA Coordinator</li> </ol> <p data-bbox="280 1254 1484 1585">The interview with the Contractor demonstrated her and the food services team completed education regarding the agency zero tolerance policy and reporting information of sexual harassment and sexual abuse within the first week of employment before having access to clients. The Contractor stated all food services staff are aware they can report to any Larimer County staff members and would remove the clients from the situation and or other clients. The Contractor stated this situation has happened in the past and the Alternative Sentencing Department responded quickly and appropriately.</p> <p data-bbox="280 1693 1474 1899">The interview with the Volunteer demonstrated the Room for Help volunteers have watched the PREA Video and received in person training from the PREA Coordinator who comes to her meetings. The Volunteer knows who she and the team can report to within the Larimer County facilities. The Volunteer stated new 'mentors' did not receive education regarding PREA until she was sure they would be a good fit.</p> <p data-bbox="280 2007 1474 2087">The interview with the PREA Coordinator demonstrated the food service contractors are not made aware of clients' status as possible victims or possible perpetrators,</p> |

and each can volunteer to work in the kitchen area for program credits.

Site Observation:

Utilization of the PREA Audit Community Confinement Documentation Review Employee File / Records Review template demonstrated both the volunteer and the contractor had received education on the agency zero tolerance policy as recently as 2023 and 2024.

During the tour there was a bathroom in the hallway in the back of the kitchen and a large living/cafeteria area observed to be connected to the kitchen. Both areas have multiple cameras. The kitchen is small; freezer and refrigerators are locked when not in use with multiple cameras throughout.

Recommendation:

Provide contract staff with knowledge of client information of known victims or aggressors for them to ensure such clients are not allowed to access the kitchen hallway and or the adjoining area when taking breaks. (Perhaps do not allow clients access to either area when working in the kitchen.)

Action Plan:

- Ensure all volunteers and contractors are trained in the agency zero tolerance policy and how to report before having access to clients.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.232. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.232 (b))
- Upload revised and completed documentation to the online audit system in provision 115.232 (b).

Post audit the facility provided a volunteer acknowledgement for those individuals who are not yet assigned volunteer work to the agency. The acknowledgement states the following: "Our agency upholds a zero-tolerance policy in compliance with the federal Prison Rape Elimination Act (PREA), which strictly prohibits all forms of sexual harassment and sexual abuse. As a mandatory reporting agency, it is crucial that volunteers report any incidents or behaviors that may raise concerns or potentially violate this policy. If you see or hear anything that makes you

uncomfortable or that could rise to the level of sexual misconduct, immediately report it to a staff member. The staff member is responsible for following through with the mandatory reporting process to ensure a safe and respectful environment for all.”

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, “A new document has been created to include the zero-tolerance policy and how to report such incidents for potential volunteers to sign after a discussion with the volunteer coordinator. All volunteers and contractors who have contact with residents shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The Volunteer Coordinator/Program Manager will manage this process.”

(a) The Larimer County Community Justice Alternatives PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The number of volunteers and contractors, who may have contact with residents, who have been trained in agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response is 62.

The facility provided a Community Justice Alternatives 2024 CJA Service Provider/ Volunteer PowerPoint Presentation. The presentation includes the following training information.

- Purpose and Scope
- Goals and Objectives
- PREA Colorado State Law
- Zero Tolerance
- How Do We Stay Safe
- Why Culture Matters
- Staff Behavior
- Professional Communication and Conduct Tips
- Maintaining Professional Boundaries
- Behaviors / Actions to Avoid

- Warning Signs
- LGBTQI Specific Tips
- Identifying Abuse and Harassment
- Sexual Abuse Includes
- Voyeurism Is Not Accidental
- Sexual Harassment Includes
- Be On The Look Out
- Obligation to Report
- Reporting an Incident
- First Responder
- Other Types of Reports

(b) The Larimer County Community Justice Alternatives PAQ states the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents. All volunteers and contractors who have contact with residents have been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The PAQ states, “We train all volunteers and services providers as if they will have frequent direct contact with clients. It’s almost the same presentation for staff.”

(c) The Larimer County Community Justice Alternatives PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received.

The facility provided a Larimer County PREA Employee - Intern - Volunteer - Contractor Agreement as is demonstrated in §115.231.

Through such reviews, the facility meets standard requirements.

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| <b>115.233</b> | <b>Resident education</b>                            |
|                | <b>Auditor Overall Determination:</b> Meets Standard |

**Auditor Discussion**

Document Review:

1. Larimer County Community Justice Alternatives PAQ
2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024
3. Sexual Abuse and Sexual Harassment Posting
4. Larimer County PREA Acknowledgment, dated 3.2023

Interviews:

1. Random Clients
2. Targeted Clients
3. Community Justice Specialists

Interviews with the 13 random, four vulnerable, three cognitively delayed, two LBG, one transgender, one disabled, one LEP and one client who reported sexual, each reported sexual abuse demonstrated each were provided with PREA education within hours of intake, their knowledge on PREA, reporting options included telling a staff, writing a letter or a grievance on a kiosk, or using the hotline number to report by referencing the postings throughout the facility. Many clients stated they were provided the Client Handbook before they entered into the program, making them aware of facility rules before being admitted.

Interviews with all Community Justice Specialists demonstrated each completes intake education with clients during the intake process. Community Justice Specialists stated clients are taken into a room where they watch the PREA video and are asked to sign the PREA acknowledgement once the agency zero tolerance policy is explained to them. In addition, clients are provided PREA education quarterly through the PREA video and review of the agency PREA brochure.

Site Observation:

Utilizing the PREA Audit - Community Confinement Facilities Documentation Review - Resident Files/Records template demonstrated 24 of 26 clients interviewed had been admitted into the facility within the past 12 months and each of the 24 client files reviewed had evidence of PREA education on the same day as admission.

Recommendation:

Enhance client PREA education acknowledgments to prompt staff to educate and ensure clients are aware of the agency policy, reporting options and rights information.

(a) The Larimer County Community Justice Alternatives PAQ states residents receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The number of residents admitted during the past 12 months who were given this information at intake was 1600.

Larimer County Community Justice Alternatives PREA Policy, page 5, section II. Client Orientation, Education and Reporting, A., states, "During client orientations, all clients will receive information about sexual abuse and sexual harassment. Information provided will include:

1. PREA Client Brochure (Form #LCCJA-I2) on self-protection, prevention, and intervention
2. How to access treatment and counseling
3. Reporting procedures
4. Consequences of false allegations

The facility provided a posting with the following information.

- Agency zero tolerance
- Internal reporting options with names and phone number information
- External reporting options with names and phone number information
- Investigation processes
- Victim services

During the pre-audit phase The facility provided the following link to the Client PREA video. <https://vimeo.com/821316037>



(b) The Larimer County Community Justice Alternatives PAQ states the facility provides residents who are transferred from a different community confinement facility with refresher information referenced in 115.233(a)-1. The number of residents transferred from a different community confinement facility during the past 12 months was 22. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was 22. Policy compliance can be found in provision (a) of this standard.

(c) The Larimer County Community Justice Alternatives PAQ states Resident PREA education is available in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled and those who have limited reading skills.

Larimer County Community Justice Alternatives PREA Policy, page 6-7, section III. Client Access to PREA Information and Reporting (Disabilities and Limited English), A. 1-2., states, "CJA shall take appropriate steps to ensure that residents with disabilities and/or limited English shall have equal opportunity to benefit from CJA efforts to prevent, detect, and respond to sexual abuse and sexual harassment in its facilities. These steps shall include but are not limited to:

1. Providing appropriate communication services. In normal, non-emergency circumstances, CJA shall furnish appropriate auxiliary aids or services within the guidelines of the ADA (Americans with Disabilities Act) to requesting individuals who have auditory or speech limitations for any necessary communication. An accompanying adult (visitor) or resident (client) may interpret only in an emergency involving an imminent threat to the safety or welfare of an individual or the public when a qualified interpreter is not immediately available.
2. All PREA-related material and information for clients will be provided in formats or through methods that ensure effective communication with clients with disabilities or any degree of illiteracy which may preclude the client from fully understanding the content of written PREA materials. Residents and clients shall not be used for this purpose."

(d) The Larimer County Community Justice Alternatives PAQ states the agency maintains documentation of resident participation in PREA education sessions.

The facility provided a Larimer County PREA Employee - Intern - Volunteer - Contractor Agreement. The agreement states the following. I, \_\_\_\_\_ (print name), attended the Criminal Justice Alternatives PREA orientation. I received a copy of the PREA brochure and I have been informed of the ZERO TOLERANCE POLICY towards sexual abuse and sexual

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|  | <p>harassment. I have been advised on ways to report incidents of prohibited sexual behavior while in custody here. I have read, or had this information read to me, and understand the contents of this policy.”</p> <p>(e) The Larimer County Community Justice Alternatives PAQ states the agency ensures that key information about the agency’s PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.234</b> | <b>Specialized training: Investigations</b>  |
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|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. PREA Investigation – The Investigative Process</li> <li>4. Seven Certifications of Completion, PREA: Investigating Sexual Abuse in a Confinement Setting</li> <li>5. Two Certifications of Completion, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations</li> <li>6. Three Rocky Mountain HIDTA Certificates: A Trauma-Informed Approach: Sexual Assault Investigations for Law Enforcement</li> <li>7. Two Certificates of Attendance: Sexual Assault Investigations for Law Enforcement: A Trauma-Informed Approach</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Case Manager / Investigator</li> </ol> <p>The interview with the Investigator demonstrated he had completed specialized training for investigators through the National Institution of Corrections website, in</p> |

person and online trainings.

Site Observation:

During the pre-audit phase certificates of completion were uploaded to the online audit system.

(a) The Larimer County Community Justice Alternatives PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.

Larimer County Community Justice Alternatives PREA Policy, page 11, section VIII. Staff Training, C., states, "In addition to the general training provided to all employees, CJA PREA Investigators shall additionally receive specialized training to investigate sexual abuse allegations in confinement settings. This training shall include but is not limited to the following:

1. Techniques for interviewing sexual abuse victims
2. Proper use of Miranda and Garrity warnings (CJA Staff are not authorized to perform these warnings.)
3. Sexual abuse evidence collection in confinement settings
4. The criteria and evidence required to substantiate a case for administrative action or prosecution referral."

The facility provided a PREA Investigation - The Investigative Process document. The document includes the following training information.

- Initial Response
- A Coordinated Response
- Sexual Assault Response Team - SART
- Criteria for Administrative Action
- Criteria for Criminal Prosecution
- Requirements for an Administrative Report
- Tips for Writing a Good Report
- Miranda and Garrity Requirements

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|  | <ul style="list-style-type: none"> <li>· PREA Standards of Forensic Medical Examinations</li> <li>· PREA Investigations – Interviewing Techniques</li> <li>· PREA Investigations – Understanding and Working with Victims</li> <li>· PREA Investigations – Institutional Culture</li> </ul> <p>(b) The Larimer County Community Justice Alternatives PAQ states the agency maintains documentation showing that investigators have completed the required training. Documentation is maintained by the PREA Coordinator. The number of investigators currently employed who have completed the required training is nine.</p> <p>The facility provided multiple types of investigator certificates demonstrating each of the nine facility investigators have completed specialized training for investigators.</p> <p>Through such reviews the facility meets standard requirements.</p> |
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| <b>115.235</b> | <b>Specialized training: Medical and mental health care</b>   |
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|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Program Manager / PREA Coordinator</li> </ol> <p>The interview with the PREA Coordinator demonstrated the facility does not employ medical and or mental health personnel.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The number of all medical and mental health care practitioners who work regularly at this facility and have received the training</p> |

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|  | <p>required by agency policy is zero. The agency does not employ medical or mental health personnel.</p> <p>(b) The Larimer County Community Justice Alternatives PAQ states the agency has no medical staff at this facility.</p> <p>(c) The Larimer County Community Justice Alternatives PAQ states the agency maintains documentation showing that mental health practitioners have completed the required training, if applicable.</p> <p>Through such reviews the facility meets the standard requirements.</p> |
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| <b>115.241</b> | <b>Screening for risk of victimization and abusiveness</b>   |
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|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 9.24.2024</li> <li>4. Larimer County Community Justice Alternatives PREA Screening, dated 8.2022</li> <li>5. Post Audit: PREA Screenings for Corrective Action / Revised Screening Form</li> <li>6. Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> <li>3. Supervisor</li> </ol> |

Interviews with 13 random and 13 targeted clients demonstrated a large percentage were asked questions regarding prior sexual abuse, their sexual identity, concerns regarding being sexually abused while residing at the facility, and if they had been confined before coming to the facility. Clients stated these types of questions have been asked again by their Case Managers.

The interview with the Case Manager demonstrated all clients are assessed within 72 hours of being admitted and questions include age, weight, violent charges, gang affiliation, if they have been in a prison or jail for more than 90 days, past victimization, if they are LGBTI and if they know what that means, if they have a disability and their perception of their own vulnerability. The Supervisor stated questions are asked in a private office and would not press the client to answer if they stated they were uncomfortable. The Supervisor stated reassessments are completed within 90 days and transgender and intersex clients will be reassessed again every six months. The Supervisor stated risk assessments are entered into the facility database and only Community Justice Alternatives staff have access, not including officers.

#### Site Observation:

Utilization of the PREA Community Confinement Documentation Review Resident File / Records Review template, 26 of 24 clients interviewed have been in the program under 12 months and 24 of 26 clients had a completed risk assessment within 72 hours of intake. The file review demonstrated 19 of 24 clients had a completed risk assessment within 30 days of intake and five clients had been in the facility less than 30 days at the time of the onsite review, therefore those risk assessments were not yet due. During the pre-audit phase risk assessments were observed to not include if past sexual abuse was against an adult or a child.

#### Action Plan:

- Update the agency revised objective risk screening instrument to include the language 'sex offenses against an adult or a child'
- Reassess clients who have been convicted of a sex offense to ensure they are housed accordingly.
- Provide updated risk assessments for clients who have been rescreened.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.241. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.241 (d))

· Upload revised and completed documentation to the online audit system in provision 115.241(d)

Post audit the facility provided 24 PREA Screening forms which were revised to include the language 'sex offenses against an adult or child' for each client who has been convicted of a sex offense.

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "The agency's risk screening instrument has been revised to include the language "against an adult or child". Residents who have been convicted of a sex offense have been re-assessed; this did not change outcomes on the tool or housing requirements. The PREA Managers will monitor this requirement."

(a) The Larimer County Community Justice Alternatives PAQ states the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents.

Larimer County Community Justice Alternatives PREA Policy, page 7-8, section E., 1-4, states, "

All clients shall be given a full assessment, utilizing an approved, standardized screening instrument:

1. Initially, within 72 hours of intake; a risk assessment review is required by 30 days of intake
2. Every 6 months thereafter, if known to be transgender or intersex
3. Annually, if not known to be transgender or intersex
4. Anytime new or additional information is received that could bear on the client's risk of sexual victimization or abuse"

(b) The Larimer County Community Justice Alternatives PAQ states the agency policy requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. The number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility was 1300. Policy compliance can be found in provision (a) of this standard.

(c-e) The Larimer County Community Justice Alternatives PAQ states the risk assessment is conducted using an objective screening instrument.

The facility provided a Larimer County Community Justice Alternatives PREA Screening. The screening documents the following information.

PREA Screening

Department / Diversion

Name / Date

Staff Name / Staff Signature

Victim / Vulnerability Factors

- Youthful age (under 22)
- Elderly age (over 60)
- Males: 5'6" and/or less than 140 lbs
- Females: 5' and/or less than 100 lbs
- Mental Illness/Developmental disability
- Physical disability
- First Incarceration
- History of non-violent crimes only
- History of sex offense convictions
- History of sexual victimization
- Feels vulnerable to victimization
- Identifies as LGBTI/perceived as LGVTI
- Other Factors

Victim / Vulnerability



- Non-victim, Known victim (if yes to 10), Possible victim (if yes to 2 or more)

Aggressive / Abusiveness Factors

- History of sexual abusiveness (in community)
- Gang affiliation
- History of Institutional violence or sexual abuse
- History of violent convictions (in community)
- Other factors

Aggressiveness / Abusiveness

- Known Abuser (if #1 of #3), Possible abuser (if yes to 2 or more), Non-abuser (no factors)

Any new information from 30-day review that requires changes in the individual's program and/or housing assignment.

30 Day Review: / Date / Reviewer / Signature

The back of the form provides instructions on completing each area of the risk screening.

(e) The Larimer County Community Justice Alternatives PAQ states the policy requires that the facility reassess each resident's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the resident's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The number of residents entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 643. Policy compliance can be found in provision (a) of this standard.

(f) The Larimer County Community Justice Alternatives PAQ states the policy

requires that a resident’s risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident’s risk of sexual victimization or abusiveness.

Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, page 11, section C.5., states, “Upon notification of a substantiated or unsubstantiated investigation from the CJA PREA Coordinator, the case manager shall conduct a PREA reassessment of the victim. CJA’s duty to report to the victim shall end upon the victim leaving custody.”

(g) The Larimer County Community Justice Alternatives PAQ states the policy prohibits disciplining residents for refusing to answer (or for not disclosing complete information related to) the questions regarding: (a) whether or not the resident has a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the residents own perception of vulnerability.

Larimer County Community Justice Alternatives PREA Policy, page 8, section G. 1-4, states, “Clients may not be disciplined for refusing to answer, or for not disclosing complete information, in response to screening questions regarding:

1. Mental, physical, or developmental disabilities
2. Sexual orientation, gender, or gender identity
3. Whether or not they have experienced previous sexual victimization
4. Own perception of vulnerability”

Through such reviews, the facility meets standard requirements.

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| <b>115.242</b> | <b>Use of screening information</b>                  |
|                | <b>Auditor Overall Determination:</b> Meets Standard |
|                | <b>Auditor Discussion</b>                            |
|                | Document Review:                                     |
|                | 1. Larimer County Community Justice Alternatives PAQ |

2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024
3. Larimer County Community Justice Alternatives Client Gender Identity Policy 1.00.140.103, dated 1.29.2024
4. Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024

Interviews:

1. Targeted Clients
2. Assistant Director of Operations / PREA Compliance Manager

Interviews with one lesbian, one gay and one transgender client demonstrated one of the three clients had heard disrespectful comments regarding a transgender client; however, this was reported to facility personnel who responded quickly by having a meeting with clients which ended the disrespectful commentary. Other targeted clients stated they were okay with their dorm assignments and feeling respected. The transgender client stated she was offered showers at a time and place away from other clients and but felt she had enough privacy in the showers in the dorm.

The interview with the PREA Compliance Manager demonstrated the facility has a color-coded tracker system assigned to management staff to ensure of the 38 men and 11 women dorms perpetrators will not be placed with vulnerable clients. Classroom and outdoor settings are always supervised/staffed for extra security measures to ensure safety amongst perpetrators and victims. In addition, sex offenders are placed in their own housing units.

Site Observation:

During the pre-audit phase, agency policy was revised to include language that victims are reassessed upon receipt of a sexual abuse incident; however, the language is not present stating aggressors are also reassessed. Specialized interviews demonstrating outcomes of client risk assessments are available to be viewed by all employees. Client files were observed to be in a hallway providing access to employees passing by to sensitive client information.

During the onsite review, the PREA Compliance Manager was able to display the color-coded tracker demonstrating the visual system for management staff awareness of possible victims and aggressors and assurance that such clients are

not housed or have program assignments together.

Action Plan:

- Agency policy be revised to include language that aggressors are reassessed upon receipt of a sexual abuse incident.
- Upload revised agency policy.
- Controls to be limited to employees who have a need to access client sensitive data.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.242. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.242)
- Upload documentation to the online audit system in provision 115.242.

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "The agency will instruct staff to scan the risk assessment into the computer system once it has been completed and to then shred the paper document. Before this audit, we started working on a project to create a paperless orientation. The electronic PREA risk screening instrument will be worked on in the upcoming months. The PREA Managers will monitor this requirement.

Please note, CJA revised the PREA policy to include language that aggressors are reassessed upon receipt of a sexual abuse incident prior to the onsite observation."

(a) The Larimer County Community Justice Alternatives PAQ states the agency/facility uses information from the risk screening required by §115.241 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive.

Larimer County Community Justice Alternatives PREA Policy, page 8, section F. states, "Information obtained from these screening instruments shall be used to make informed, individualized decisions regarding each client's housing and programs placement. This information shall be limited in dissemination only to those staff who make housing and program placement decisions."

(b) The Larimer County Community Justice Alternatives PAQ states the agency/ facility makes individualized determinations about how to ensure the safety of each resident. Policy compliance can be found in provision (a) of this standard.

(c) The Larimer County Community Justice Alternatives PAQ states the agency/ facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis.

Larimer County Community Justice Alternatives Client Gender Identity, page 2, section Housing, states, "Prior to receiving a housing assignment, staff will have already met with the client regarding their preferences and concerns about safety. An agreement as to the housing arrangements shall be made with serious consideration given to the client's choice and preference in housing assignments.

The agency shall not place clients who have special requirements based on gender identity in dedicated facilities, units, or wings solely on the basis of such identification or status unless such placement is in a dedicated facility, wing, or unit established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such residents.

PREA mandates that CJA ensures all clients are able to shower and undress without being viewed by staff of the opposite gender and that staff announce their presence when entering a residential shower or restroom area. (Also see CJA Policy 1.00.130.115 Facility Monitoring, Section D)

Clients who have completed their transition shall be housed with clients of their reassigned gender. Placement in specialized housing is re-evaluated upon client request.

If separate housing is not possible due to overall facility population, housing area usage, or other management concerns; or is deemed not in the best interests of the client, all care shall be taken to minimize the risk by conducting a thorough risk assessment of all potential co-habitants of the assigned room, shared common areas, and programs. This risk assessment shall include a review of all co-habitants' PREA screens, as well as a review of any security, health, and/or safety concerns related to the placement, and shall include a consultation with the client.

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|  | <p>Changes to any client's housing, program, and common area assignments may be made according to this, or any other follow-up, assessments.”</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.251</b> | <b>Resident reporting</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives PREA Brochure for CJJA Programs Client, dated 4.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> </ol> <p>Interviews with clients demonstrated each would report directly to any staff member, call the hotline, write a letter or fill out a grievance to report sexual harassment or sexually abuse. One client stated staff had written down phone numbers of staff in the program whom she could report to via a phone. Clients reported they are able to use their cell phones when off site and during scheduled times during the day. Clients stated they can also use phones in dorm conference rooms and those call calls are not monitored.</p> <p>Site Observations:</p> <p>During the tour, PREA postings to include information on sexual harassment, sexual abuse, internal and external reporting information, in house advocate and the inhouse facility PREA Team staff names and phone numbers, and external advocate address and phone number information was observed throughout the facility, on</p> |

each bulletin board in client dayrooms were observed. Facility brochures provide multiple external reporting options to include the Sheriff Department, external advocate and the DOC Tips hotline.

Recommendation:

Include the preferred external reporting agency on the client brochure to ensure victims of abuse do not have to call multiple agencies when reporting sexual harassment and or sexual abuse.

(a) The Larimer County Community Justice Alternatives PAQ states the agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other residents or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.

The facility provided a Larimer County Community Justice Alternatives PREA Brochure for CJA Programs Clients. The brochure provides the following information.

- There is zero tolerance for sexual behavior while in the custody of a CJA program. Sexual behavior of any kind is not allowed.

- o What does Zero-Tolerance Mean?

- You have the right to be safe from clients as well as staff. Staff may NOT have romantic relationships or sexual acts with clients.

- o Sexual Abuse and Sexual Harassment May Include

- o Helpful Ways to Stay Safe

- o I've Been a Victim - What do I do?

- o How to Report

- o Treatment and Counseling

- o What do I do if I'm Being Retaliated Against

Larimer County Community Justice Alternatives PREA Brochure for CJA Programs Clients, page 3, section D. How to Report provides the following reporting options.

- Tell a trusted CJA employee verbally or in writing, especially if it is an emergency
- Contact the Sexual Assault Victims Advocate Center (SAVA) (970) 472-4204
- Contact a CJA Victim Witness Specialist: (970) 498-7503 – Darcy, (970) 980-2688 – Jean
- Contact your case manager, community parole/ probation officer, therapist, or other medical professional
- Call the toll-free CDOC TIPS line and leave a message: 1-877-362-8477
- Contact the Larimer Sheriff’s Department (970) 416-1985

On 9.6.2024 at 9:38 am MST, this Auditor phoned the CDOC TIPS line. After proper introductions and the reason for the call a call was requested to verify this line was responded to in a timely manner. On 9.6.2024 at 9:47 am the call was returned via text message, stating, “This is Theresa DOC Crime Tips number is functional, and I received your message. This line is monitored primarily by me, employee BD from CDOC Office of the Inspector General. As this TIPSLine is for any type of crime reporting for CDOC, it depends on the call who is notified. In PREA cases, they are all referred to our PREA Manager, Jerri Worm.”

(b) The Larimer County Community Justice Alternatives PAQ states the agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. Procedure compliance can be found in provision (a) of this standard.

(c) The Larimer County Community Justice Alternatives PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.

Larimer County Community Justice Alternatives PREA Policy, page 9, section VI. Staff Reporting, A., states, “CJA Workers with reasonable cause to suspect sexual abuse or sexual harassment by a client or CJA worker shall immediately activate PREA protocols and utilize the PREA Incident Response Manual.”

(d) The Larimer County Community Justice Alternatives PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents.



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|  | <p>Larimer County Community Justice Alternatives PREA Policy, page 10, section E., states, “If staff suspects co-worker or other agency personnel of sexual abuse or sexual harassment toward a client, they are required to report such suspicion. This report may be made to the CJA Director, the Department Director, the PREA Coordinator, the Sexual Assault Victim Advocate Center, or privately to Law Enforcement (independent of reporting within the chain of command).”</p> <p>Please reference §115.253 which demonstrates a call was made to the Sexual Assault Victim Advocate Center verifying they will accept calls from staff members and report allegations received to law enforcement upon request from the caller.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.252</b> | <b>Exhaustion of administrative remedies</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 9.24.2024</li> <li>4. Grievance Outcome Documentation</li> <li>5. Client Disciplinary Action</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> <li>3. Program Manager / PREA Coordinator</li> </ol> <p>Interviews with clients demonstrated a large percentage were aware of the</p> |

grievance procedures. Clients stated grievances can be completed at the kiosk.

The interview with the PREA Coordinator demonstrated that grievances entered into the kiosk are directed to the individual Program Director and the PREA Team members.

Site Observation:

A client was able to demonstrate how he enters his personal information to access the kiosk to locate PREA information and enter a grievance.

(a) The Larimer County Community Justice Alternatives PAQ states the agency does have an administrative procedure for dealing with resident grievances regarding sexual abuse.

Larimer County Community Justice Alternatives PREA Policy, page 5-6, section II. Client Orientation, Education, and Reporting, C., states, "Clients who are victims of or have knowledge of sexual abuse or sexual harassment by a client or CJA worker should immediately report the incident by one of the following methods:

1. Report the incident to a staff member.
2. Utilize the client grievance procedure as outlined in the client handbook.
  - a. It is not required that a client utilize the client grievance procedure at any time if reporting an incident that falls under PREA guidelines.
  - b. If a grievance is submitted alleging an incident that falls under PREA guidelines:
    - i. No timeline shall be established that limits the time period in which a grievance may be submitted.
    - ii. No informal resolution process shall be required prior to accepting and responding to the grievance.
    - iii. The grievance shall not be submitted and/or directed to a staff member who is the subject of a complaint.
  - c. For the purposes of PREA reporting, a grievance regarding an incident of sexual abuse and sexual harassment shall, for all intents and purposes, be treated as a PREA report and shall be handled and expedited in full accordance with PREA guidelines established herein. Nothing in existing policy and procedure regarding client grievance procedures shall preclude any part of established PREA response protocols from being activated.
- c. All grievances regarding sexual abuse and sexual harassment shall be

immediately screened, and first response protocols initiated, by the recipient of the grievance in the same manner as any other PREA Report. If the grievance alleges an immediate or imminent threat, the First Responder shall take immediate action commensurate with the safety and security needs of the reporting client and the facility. Specifically, such action must include immediately notifying the facility's PREA Manager (in person or by phone call) to ensure that all necessary response steps are taken.

d. CJA shall 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.

(b) The Larimer County Community Justice Alternatives PAQ states the agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Agency policy does not require a resident to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. Policy compliance can be found in provision (a) of this standard.

(c) The Larimer County Community Justice Alternatives PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure require that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Policy compliance can be found in provision (a) of this standard.

(d) The Larimer County Community Justice Alternatives PAQ states the agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances filed that alleged sexual abuse was three. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was three. Policy compliance can be found in provision (a) of this standard.

The facility provided a PREA investigation, a PREA Checklist and a PREA incident debrief demonstrating the outcomes of all three PREA related grievances.

(e) The Larimer County Community Justice Alternatives PAQ states the agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse

and to file such requests on behalf of residents. Agency policy and procedure requires that if a resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident decision to decline. The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident decision to decline was zero.

Larimer County Community Justice Alternatives PREA Policy, page 6, section F. 1., states, "Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing grievances relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.

1. If a resident declines to have third-party assistance in filing a grievance alleging sexual abuse, CJA staff shall document the residents' decision to decline in a case note in the CJA information management system. The PREA Coordinator shall document the residents decision to decline in the PREA Incident Debriefing Report (Form #LCCJA-41)."

(f) The Larimer County Community Justice Alternatives PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero.

Larimer County Community Justice Alternatives PREA Policy, page 6, section d., states, "All grievances regarding sexual abuse and sexual harassment shall be immediately screened, and first response protocols initiated, by the recipient of the grievance in the same manner as any other PREA Report. If the grievance alleges an emergency grievance or imminent threat, the First Responder shall take immediate action commensurate with the safety and security needs of the reporting client and the facility. Specifically, such action must include notifying the facility's PREA Manager (in person or by phone call) to ensure that all necessary response steps are taken within 48 hours."

(g) The Larimer County Community Justice Alternatives PAQ states the agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, the number of

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|  | <p>resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith was one.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 6, section D., states, “Unfounded, deliberately malicious, or false reports by clients or other parties may result in disciplinary action or criminal charges.”</p> <p>The facility provided documentation demonstrating Violation #205B, Disrespectful or Inappropriate Behavior was provided to Client involved in a sexual abuse incident.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.253</b> | <b>Resident access to outside confidential support services</b>  |
|                | <b>Auditor Overall Determination:</b> Exceeds Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Brochure for CJA Programs Client, dated 4.2024</li> <li>3. Memorandum of Understanding Sexual Assault Victim Advocate Center, dated 8.17.2023</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> </ol> <p>Interviews with clients demonstrated a large percentage were aware of SAVA House and the offerings provided through the sexual abuse advocacy agency. In addition, clients were aware the facility had two victim advocates within their employ and available to them upon request.</p> |

Site Observation:

During the tour SAVA Advocate brochures were observed to be posted in client day rooms.

(a) The Larimer County Community Justice Alternatives PAQ states the facility provides residents with access to outside victim advocates for emotional support services related to sexual abuse. The facility provides residents with access to such services by giving residents mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. The facility provides residents with access to such services by enabling reasonable communication between residents and these organizations in as confidential a manner as possible.

The facility provided a Larimer County Community Justice Alternatives PREA Brochure for CJJA Programs Client which provides the following contact information.

Sexual Assault Victims Advocacy Center (SAVA)

4812 S. College Ave, Fort Collins, CO 80525

(970) 472-4204

(b) The Larimer County Community Justice Alternatives PAQ states the facility informs residents, prior to giving them access to outside support services, of the extent to which such communications will be monitored. The PAQ states, "Client's have access to their personal cell phone."

(c) The Larimer County Community Justice Alternatives PAQ states the agency, or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that can provide residents with emotional support services related to sexual abuse.

The facility provided a Memorandum of Understanding (MOU) between Larimer County Community Justice Alternatives and Sexual Assault Victim Advocate Center. The purpose of this MOU is to provide victim advocacy and confidential reporting services for clients of LCCJA in adherence to Prison Rape Elimination Act (PREA) Standards. The term of this MOU is in effect until 8.31.2028 and is signed by the Larimer County Community Justice Alternatives Director and the Sexual Assault Victim Advocate Center Executive Director on 8.17.2023.

On 9.6.2024 at 9:59 am, this Auditor phoned the Sexual Assault Victims Advocate Center at 970.472.4204. After proper introductions and the reason for the call a Prevention Education Specialist, who disclosed that she was very new to her position, stated "The agency has PREA Specialists. When we receive a call, we ask for a verbal Release of Information (ROI) and the advocate will meet in person with the caller within 24 hours. Our advocates assist with making reports to the correct external entities. Until the advocate can arrive the advocacy agency will assist the victim with self-care, coping skills, and emotional care." The Prevention Education Specialist also stated personnel at the advocacy agency complete a 40-hour training involving role playing, questions related to PREA and on call support systems. Due to the specialist being so new in her position, she transferred the call to an advocate in the office to clarify further questions.

Again, after proper introductions and the reason for the call the Advocate stated she was aware of the MOU which began in 2022 with local facilities in surrounding counties. The Advocate stated they could work with victims if the call is received directly by the victim and or sometimes the forensic nurse or law enforcement will call and request support. The Advocate stated they will meet the victim at the hospital and begin providing emotional support. The PREA Advocate would be the one to respond to these calls or another advocate could respond in her absence. During the exam, for confidentiality purposes, conversations are limited until advocates can talk with them individually. The advocacy agency does ask for a verbal ROI before engaging in confidential conversations. The Advocate added they can work with victims of current and past abuse, of any gender, age, with no restrictions. The Advocate stated they are not mandated to report, but if the client requests help making a report, advocates will make a report to law enforcement. The Advocate stated if facility staff report to them, they will make a report to Law Enforcement, but staff must request a report made to law enforcement. The Advocate did state during conversations with staff, staff are prompted, asking if they would like the advocacy agency to report to law enforcement. Lastly, the Advocate stated on-going support is provided with clients and or staff in person, or virtual, whichever is preferred and that their PREA Advocate responds to all calls, in person, at the Larimer County Justice Alternatives Programs within 24 hours of receipt of any call.

Through such reviews of the agency having victim advocates within their employ in addition to access to the local Sexual Abuse Victim Advocates, the facility exceeds the standard requirements.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Document Review:

1. Larimer County Community Justice Alternatives PAQ
2. Larimer County Community Justice Alternatives PREA Brochure for CJJA Programs Clients, dated 4.2024

Interviews:

1. Random Clients
2. Targeted Clients
3. Community Justice Specialists
4. Assistant Director of Operations / PREA Compliance Manager

Interviews with clients demonstrated a large percentage were aware of third-party reporting options who could be a family member, attorney or another client.

Interviews with staff demonstrated each would accept any type of report regarding allegations received through a third party.

Site Observation:

During the facility tour, agency informational PREA postings of the facility third party reporting information including internal and external reporting information was observed in the visitation areas.

(a) The Larimer County Community Justice Alternatives PAQ states the agency, or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency or facility publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents.

Larimer County Community Justice Alternatives PREA Brochure for CJJA Programs Clients, page 3, section D. How to Report provides the following reporting options.



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|  | <ul style="list-style-type: none"> <li>· Tell a trusted CJA employee verbally or in writing, especially if it is an emergency</li> <li>· Contact the Sexual Assault Victims Advocate Center (SAVA) (970) 472-4204</li> <li>· Contact a CJA Victim Witness Specialist: (970) 498-7503 – Darcy, (970) 980-2688 – Jean</li> <li>· Contact your case manager, community parole/ probation officer, therapist, or other medical professional</li> <li>· Call the toll-free CDOC TIPS line and leave a message: 1-877-362-8477</li> <li>· Contact the Larimer Sheriff’s Department (970) 416-1985</li> </ul> <p>On 9.6.2024 at 12:41 pm this Auditor contacted the Larimer Sheriff’s Department at 970.416.1985. After proper introductions and the reason for the call the Dispatcher was able to state she was aware of an agreement that the Police Department would respond to any crime that has occurred at the Community Corrections Program, and she would document the information into the Departments CAB system and assign to a Deputy.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.261</b> | <b>Staff and agency reporting duties</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Clients</li> <li>3. Community Justice Specialists</li> </ol> |

4. Assistant Director of Operations / PREA Compliance Manager

5. Program Manager / PREA Coordinator

Interviews with the staff and clients demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment. One client stated he had reported sexual harassment, and the facility responded within a week and the aggressor was regressed to prison.

On Site Observation:

The facility has had six sexual abuse and four sexual harassment allegations in the past 12 months. Investigations demonstrate investigations began the week allegations were received and completed within three to five weeks of receipt of the allegation.

(a) The Larimer County Community Justice Alternatives PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Larimer County Community Justice Alternatives PREA Policy, page 9, section VI. Staff Reporting A., states, "CJA Workers with reasonable cause to suspect sexual abuse or sexual harassment by a client or CJA worker shall immediately activate PREA protocols and utilize the PREA Incident Response Manual."

(b) The Larimer County Community Justice Alternatives PAQ states, apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Larimer County Community Justice Alternatives PREA Policy, page 10, section F., states, "Apart from reporting to designated supervisors or officials and designated state or local services agencies, CJA policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent

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|  | <p>necessary to make treatment, investigation, and other security and management decisions.”</p> <p>(c) This provision is not applicable as the facility does not have medical or mental health staff.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.262</b> | <b>Agency protection duties</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Community Justice Specialists</li> <li>2. Assistant Director of Operations / PREA Compliance Manager</li> <li>3. Program Manager / PREA Coordinator</li> </ol> <p>Interviews with staff demonstrated victims would be immediately separated from aggressors and placed in a safe place until administrative personnel or law enforcement could arrive.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse was zero.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 9, section VI. Staff</p> |

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|  | <p>Reporting, A., states, "CJA Workers with reasonable cause to suspect sexual abuse or sexual harassment by a client or CJA worker shall immediately activate PREA protocols and utilize the PREA Incident Response Manual."</p> <p>Through such reviews the facility meets standard requirements.</p> |
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| <b>115.263</b> | <b>Reporting to other confinement facilities</b>   |
|                | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Reporting Letter to Receiving Agency</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Director of Community Justice / Head of Agency</li> </ol> <p>The interview with the Director of Community Justice / Head of Agency demonstrated that she was aware that upon receiving an allegation that a client was sexually abused while confined at another facility, she had the responsibility to notify the head of the facility where the allegation occurred.</p> <p>(a-b) The Larimer County Community Justice Alternatives PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was one.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 8, section H., states, "Any information obtained during the screening that indicates the client may have been the victim or perpetrator of sexual abuse in a previous facility shall be</p> |

immediately passed on to a PREA Manager or the PREA Coordinator, who shall notify the CJA Director, who shall, in turn, notify the appropriate office of the facility at which the incident allegedly occurred. Such notification shall occur within 72 hours of when the information was initially reported, and it shall be documented via email or written report. Such documentation shall be forwarded to the PREA Coordinator for retention.”

The facility provided a letter to the receiving agency providing information on a client report explaining a relationship that had taken place between an inmate and a staff member. The letter is dated on the same date the letter states the date the report was received.

(c) The Larimer County Community Justice Alternatives PAQ states the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. Policy compliance can be found in provision (a) of this standard.

(d) The Larimer County Community Justice Alternatives PAQ states the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero.

Larimer County Community Justice Alternatives PREA Policy, page 8, section I., states, “Allegations received from other facilities and agencies are investigated in accordance with the PREA standards.”

Through such reviews, the facility meets the standard requirements.

| 115.264 | Staff first responder duties   |
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|         | <b>Auditor Overall Determination:</b> Meets Standard   |
|         | <b>Auditor Discussion</b>  |
|         | Document Review:<br><ol style="list-style-type: none"><li>1. Larimer County Community Justice Alternatives PAQ</li><li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101,</li></ol> |

dated 4.22.2024

Interviews:

1. Community Justice Specialists

Interviews with Community Justice Specialists demonstrated each were aware of their first responder responsibilities and spoke to the separation of victims and aggressors, being sure they were kept safe until administrative personnel could arrive. (Due to first responders not speaking to the preservation of evidence a corrective action plan was put into place in §115.231) Staff interviewed were comfortable reporting internally and understood the processes for reporting externally.

(a) The Larimer County Community Justice Alternatives PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be 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. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The PAQ states, "Reports of abuse were not contemporaneous."

In the past 12 months, four allegations occurred where a resident was sexually abused. The PAQ states, "3 substantiated, 1 unsubstantiated". In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence was zero. In the past 12 months, the number of allegations that a resident was sexually abused was zero.

Larimer County Community Justice Alternatives PREA Policy, page 11, section D.,

states, "In addition to the general training provided to all employees and the training received by PREA Investigators, PREA Managers shall additionally receive specialized training to coordinate CJA's efforts to comply with the PREA standards including but not limited to the following:

1. Staff, contractor, volunteer and client training and education
2. PREA risk screening
3. The facility staffing plan
4. Reporting and incident response 5. Investigations 6. Documentation of PREA incident."

(b) The Larimer County Community Justice Alternatives PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero. The PAQ states, "All CJA staff and contractors are trained as first responders."

Through such reviews, the facility meets standard requirements.

| 115.265 | Coordinated response  |
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|         | <b>Auditor Overall Determination:</b> Meets Standard  |
|         | <b>Auditor Discussion</b>   |
|         | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Post Audit: PREA Coordinated Response, dated 1.1.2018</li> <li>4. Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024</li> </ol> <p>Interviews:</p> |

1. Community Justice Specialists
2. Assistant Director of Operations / PREA Compliance Manager
3. Program Manager / PREA Coordinator

Interviews with the staff demonstrated the response to sexual harassment and sexual abuse instructions are made available in the green book which is maintained in the staff area in or near dorms.

Site Observation:

The green binders were observed to be available in staff work areas near client dorms; however, a coordinated response to be inclusive for every department response to instruction when responding to sexual harassment and sexual assault was not present. Therefore, a written institutional plan does not appear to be organized in a single document.

Action Plan:

- Agency to write an institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.
- Upload documentation to the online audit system in provision 115.265.

Post audit the facility provided a coordinated response to include instruction for the first responder, PREA Manager, Victim Witness Specialist and the PREA Investigator.

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "The agency's PREA policy was revised to highlight in the existing PREA policy the coordinated response to an incident of sexual abuse, among staff first responders, investigators, and facility leadership. Please note, CJA does not have medical and mental health practitioners."

(a) The Larimer County Community Justice Alternatives PAQ states the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

Through such reviews, the facility meets standard requirements.



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| <b>115.266</b> | <b>Preservation of ability to protect residents from contact with abusers</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>Larimer County Community Justice Alternatives PAQ</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Program Manager / PREA Coordinator</li> </ol> <p>The PREA Coordinator stated the agency has not entered into collective bargaining agreements of any kind.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states the agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency’s behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Through such reviews, the facility meets standard requirements.</p> |

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| <b>115.267</b> | <b>Agency protection against retaliation</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>Larimer County Community Justice Alternatives PAQ</li> <li>Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>Post Audit: PREA Power Hour Chat on 115.67 Retaliation Monitoring, dated 10.29.2024</li> <li>Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024</li> </ol> |

Interviews:

1. Victim Assistants / Retaliation Monitors (2)

The interview with the facility Victim Assistants demonstrated victim services monitors retaliation monitoring. Victim Assistants stated victims are notified of the agency retaliation procedures upon notification that a sexual harassment or sexual abuse incident occurs. Assistants ensure victims feel safe, are provided internal and external resources, meet with victims face to face every 30 days and case managers are made aware of outcomes of those meetings. Victim Assistants stated periodic checks are entered into the LOIS database for up to 90 days or as long as necessary.

Pre-Audit and Site Observation:

PAQ and investigation file review demonstrated retaliation monitoring has not continued for 90 days following a sexual abuse incident report. The agency does not currently have a position to monitor retaliation monitoring for personnel who may have reported a sexual abuse incident.

Action Plan:

- Appropriate facility staff to complete documented training on all provisions of §115.267.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.267. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.267)
- Upload documentation to the online audit system in provision 115.267 (c).

Post audit the facility provided a training document demonstrating three employees completed training on §115.67.

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "CJA Victim Advocates and PREA Coordinator have been trained on this provision. This has been added to the agency PREA tracker and Debriefing form. The PREA Coordinator will manage this requirement." The PREA coordinator will monitor retaliation monitoring for staff who report sexual abuse. Larimer County uses a system called the Learning Center

which all County employees use to log on and document their required training. The second page of that document lists all the staff who attended and completed that training. However, I will upload a new document to include signatures and date for the training.”

(a) The Larimer County Community Justice Alternatives PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The CJA Victim Witness Specialists are the designated staff completing retaliation monitoring.

Larimer County Community Justice Alternatives PREA Policy, page 6, section E., states, “CJA will not tolerate retaliation against clients, CJA Workers, or other parties for reporting sexual abuse or sexual harassment. CJA Workers that retaliate may face disciplinary action up to and including termination of employment.

1. Clients who report such conduct are protected from retaliation as outlined in CJA Policy #100.110.204 Professional Conduct and shall be entitled to additional protection measures, if warranted, to ensure that no such retaliation takes place. These measures include, but are not limited to:

- a. Changed housing assignments
- b. Facility transfers
- c. Additional status checks/watches
- d. Removal of contact with alleged staff or resident abusers, (e). Emotional support services through an in-house advocate or SAVA”

(c) The Larimer County Community Justice Alternatives PAQ states the facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by residents or staff. The facility will monitor conduct or treatment until the resident is discharged. The facility acts promptly to remedy any such retaliation. The number of times an incident of retaliation occurred in the past 12 months was zero.

Through such reviews, the facility meets standard requirements.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Document Review:

1. Larimer County Community Justice Alternatives PAQ
2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024
3. Post Audit: PREA Team Meeting Training – Credibility Assessments/New Investigative Report Template and SAIR, dated 10.23.2024
4. Post Audit: Completed Administrative Investigations
5. Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024

Interviews:

1. Case Manager / Investigator

The interview with the investigator demonstrated the facility administration assigns the investigation and if the incident warrants notification to law enforcement and only PREA Managers will complete investigations involving staff members. The investigator stated once he is assigned the investigation, he discusses the incident with the PREA Team, meets with the victim as soon as possible, offers a victim advocate, makes sure the victim feels safe and comfortable talking with him, interviews the perpetrator and all witnesses, reviews camera footage, logs and any other documentation made available and then writes an assessment of his findings on a word document investigation template.

Site Observation:

Review of investigations by utilizing the PREA Audit – Community Confinement Documentation Review – Investigations template demonstrated of the 10 investigations reviewed during the onsite review, six of those investigations were sexual abuse; however, three of the investigations involved staff members where law enforcement was notified. Of the three criminal investigations involving staff, one client absconded; however, none of the investigations involving staff members had been followed up with an administrative investigation.

Action Plan:

- Appropriate facility investigators to complete documented training on all provisions of §115.271.
- Investigation template to be revised to include each documentation requirement for investigations.
- Administrative investigations to be completed for all criminal investigations as well as investigations involving agency personnel.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.271. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.271)
- Upload documentation to the online audit system in provision 115.271 (a).

Post audit the facility provided a PREA Team Meeting Training - Credibility Assessments/New Investigative Report Template and SAIR demonstrating 12 facility personnel have completed the required training for the corrective action plan.

Post audit the facility provided completed administrative investigations for those incidents reported to law enforcement involving agency staff members. These investigations demonstrate the investigation template and the debrief form (SAIR) have been revised to include required components to complete a full investigation per standard requirements.

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "The agency's administrative investigation template has been revised to include the required documentation. Administrative investigations have been completed involving agency personnel. The PREA Coordinator will manage this requirement."

(a) The Larimer County Community Justice Alternatives PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.

Larimer County Community Justice Alternatives PREA Policy, page 10, section VII. First Response/Investigative Protocols, B. through C. 1-5., states, "

A. CJA shall establish procedures for the administrative investigations of sexual abuse or sexual harassment by a client or CJA worker. Larimer County Human Resources may be brought in on the investigation if adverse action is anticipated or

possible as a result of the outcome of any investigation alleging inappropriate conduct by a staff member.

B. CJA shall ensure that standard evidence protocols are met anytime that a crime scene, victim, or perpetrator may have usable evidence pertinent to an investigation of alleged sexual abuse or sexual harassment. These protocols are outlined in the PREA training session, and in the First Responder Manual.

1. Upon the conclusion of administrative and or criminal investigation, the victim shall be notified of the outcome of the investigation and the determination if their complaint was substantiated, unsubstantiated, or unfounded (CJA shall request all pertinent information from criminal investigators, if applicable)

2. If the allegation is found to be credible, the victim shall be informed whenever the alleged perpetrator (staff or client) is:

a. No longer posted in the housing unit.

b. No longer employed at the facility.

c. Indicted d. Convicted 3.

2. The CJA Victim Witness Specialist shall be responsible for making such notifications and for documenting the notification in the client file.

3. At the conclusion of a PREA qualifying incident, the CJA PREA Coordinator shall notify case managers and therapists of the outcome of the investigation.

4. Upon notification of a substantiated or unsubstantiated investigation from the CJA PREA Coordinator, the case manager shall conduct a PREA reassessment of the victim within 30 days.”

(h) The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later is three. The PAQ states, “these three involved staff or contract workers.”

Through such reviews, the facility meets standard requirements.

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| <b>115.272</b> | <b>Evidentiary standard for administrative investigations</b> |
|                | <b>Auditor Overall Determination:</b> Meets Standard          |
|                | <b>Auditor Discussion</b>                                     |

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|  | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Case Manager / Investigator</li> </ol> <p>Interviews with the Investigator demonstrated he would apply a preponderance of evidence when deciding the outcome for investigation.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 11, section E., states, "In determining whether an allegation of sexual abuse or sexual harassment is substantiated, unsubstantiated, or unfounded, the decision shall be based solely upon the preponderance of the evidence gathered during the investigation."</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.273</b> | <b>Reporting to residents</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Documentation substantiating an inappropriate relationship between a staff and client</li> </ol> |

4. Documentation of a Resident Notification

5. Post Audit: Larimer County Community Justice Alternatives Memorandum, Subject: 2024 PREA Audit Action Plan, dated 10.10.2024

Interviews:

1. Case Manager / Investigator

Interviews with the Investigator demonstrated the facility Victim Assistants would notify victims of the outcome of sexual abuse investigations and documents those notifications in the LOIS database.

Site Observation:

The facility has had six sexual abuse investigations in the past 12 months. Of those investigations, one client discharged before the investigation was completed, one client absconded, one notification was not provided, and three notifications had been completed; however, notifications of staff movements had not been provided for those investigations.

Action Plan:

- Appropriate facility appropriate to complete documented training on all provisions of §115.273.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.273. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.273)
- Upload documentation to the online audit system in provision 115.273 (c).

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "The agency's policy has been updated to include the following information. Following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency shall subsequently inform the resident (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the resident's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. This is on



page 10 of the PREA policy #C. The PREA Coordinator will manage this requirement.”

(a) The Larimer County Community Justice Alternatives PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged resident sexual abuse that were completed by the agency/facility in the past 12 months was four. Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of residents who were notified, verbally or in writing, of the results of the investigation was three. The PAQ states, “One investigation was completed by a PREA manager before our agency head made the decision to refer all staff/contract worker/volunteer grievances to the Larimer County Sheriff’s office.”

Larimer County Community Justice Alternatives PREA Policy, page 10, section C. 1-3., states, “CJA shall ensure that standard evidence protocols are met anytime that a crime scene, victim, or perpetrator may have usable evidence pertinent to an investigation of alleged sexual abuse or sexual harassment. These protocols are outlined in the PREA training session, and in the First Responder Manual.

1. Upon the conclusion of administrative and or criminal investigation, the victim shall be notified of the outcome of the investigation and the determination if their complaint was substantiated, unsubstantiated, or unfounded (CJA shall request all pertinent information from criminal investigators, if applicable)

2. If the allegation is found to be credible, the victim shall be informed whenever the alleged perpetrator (staff or client) is:

- a. No longer posted in the housing unit.
- b. No longer employed at the facility.
- c. Indicted
- d. Convicted

3. The CJA Victim Witness Specialist shall be responsible for making such notifications and for documenting the notification in the client file.”

(b) The Larimer County Community Justice Alternatives PAQ states an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation. The number of investigations of alleged resident sexual abuse in the

facility that were completed by an outside agency in the past 12 months was three. Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of residents alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation was three.

(c) The Larimer County Community Justice Alternatives PAQ states following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever: (a) the staff member is no longer posted within the resident's unit; (b) the staff member is no longer employed at the facility; (c) the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (d) the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. There have been zero substantiated and unsubstantiated complaints in the past 12 months. The PAQ states, "no notifications on the fed client who escaped." Policy compliance can be found in provision (a) of this standard.

The facility provided extensive documentation to substantiate an incident of an inappropriate relationship between a staff member and a client.

(d) The Larimer County Community Justice Alternatives PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: (a) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (b) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. Policy compliance can be found in provision (a) of this standard.

The facility provided a case note demonstrating the victim had been notified of the outcome of two separate allegations of sexual abuse. The case note appears to be documented in the agency client database.

(e) The Larimer County Community Justice Alternatives PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In the past 12 months, there have been five notifications to a resident, pursuant to this standard. Of those notifications made in the past 12 months, the number that were documented was five.

Through such reviews, the facility meets the standards requirements.

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| <b>115.276</b> | <b>Disciplinary sanctions for staff</b>  |
|                | <p data-bbox="280 188 983 224"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="280 264 564 300"><b>Auditor Discussion</b></p> <p data-bbox="280 340 545 376">Document Review:</p> <ol data-bbox="280 412 1445 560" style="list-style-type: none"> <li data-bbox="280 412 1088 448">1. Larimer County Community Justice Alternatives PAQ</li> <li data-bbox="280 483 1445 560">2. Larimer County Community Justice Professional Conduct Policy 1.00.110.204, dated 1.18.2024</li> </ol> <p data-bbox="280 667 437 703">Interviews:</p> <ol data-bbox="280 739 858 775" style="list-style-type: none"> <li data-bbox="280 739 858 775">1. Director of Alternative Sentencing</li> </ol> <p data-bbox="280 810 1477 1052">Interviews with the Program Director demonstrated the facility has had two staff who have been disciplined for violation of an agency sexual abuse or sexual harassment policy in the past 12 months. The Program Director stated staff involved in a substantiated sexual abuse investigation would be terminated, reported to appropriate licensing agencies, law enforcement, the Community Confinement Board and the Department of Criminal Justice would be notified.</p> <p data-bbox="280 1164 1468 1281">(a) The Larimer County Community Justice Alternatives PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="280 1393 1430 1509">Larimer County Community Justice Professional Conduct Policy, page 8-9, section XII. Larimer County Community Corrections (LCCC) Requirements (LCCC Employees), A. through E., state, “</p> <p data-bbox="280 1545 1471 1832">A. “If any employee of LCCC is charged with a criminal offense (petty, misdemeanor or felony offense), violates CJA's policy on conflict of interest, or engages in nonprofessional relationships with a client, the information must be immediately reported through the chain of command to the CJA Director. In accordance with DCJ Community Corrections Standards, the Department Director or designee will immediately notify the local LCCC Advisory Board and the Division of Criminal Justice (DCJ) by telephone, followed in writing within 24 hours.</p> <p data-bbox="280 1868 1398 1984">B. In those incidents involving clients, the respective referral agency (e.g., Probation, Dept. of Corrections, US District of Colorado Probation, etc.) shall be notified in a similar punctual manner.</p> <p data-bbox="280 2020 1401 2056">C. At any point during an investigation of an employee, before being formally</p> |

charged or before confirmation of misconduct toward a client, the Department Director has the discretion to notify the LCCC Advisory Board and DCJ, as well as the respective referral agency if applicable.

D. In accordance with OMA-014 Staff Criminal Conduct, LCCC shall obtain approval from the Advisory Board and DCJ in the consideration of retaining an employee formally charged with or convicted of a criminal offense, including a plea of guilty or no contest. If the criminal offense involves a client, LCCC shall also consult the respective referral agency.

E. Any employee receiving a formal complaint or found to have committed a violation of their professional license by a regulatory board will be immediately reviewed by the Clinical Director and Department Director; the CJA Director and Human Resources will be notified and consulted. The Department Director may immediately place the employee on administrative leave during the review. This review includes, but is not limited to, an evaluation of the complaint/violation similar to the pre-employment background investigation for credential history (see CJA Policy #1.00.110.154 Hiring), and further consultation with Human Resources. The employee may be subject to corrective or adverse actions based on the outcome of the review.”

(b) The Larimer County Community Justice Alternatives PAQ states in the last 12 months, there has been two staff from the facility that had violated agency sexual abuse or sexual harassment policies. In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies is zero. In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies was two.

(c) The Larimer County Community Justice Alternatives PAQ states the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. In the past 12 months there have been zero staff requiring discipline for sexual abuse or sexual harassment. The PAQ states, “County HR policies take precedence.”

(d) The Larimer County Community Justice Alternatives PAQ states 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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any

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|  | <p>relevant licensing bodies. In the past 12 months, one staff member has been terminated for sexual abuse or harassment. During the pre-audit phase the agency stated the PREA Coordinator has copies of complaint notifications to DORA, the licensing body for the staff member involved in a sexual abuse incident.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.277</b> | <b>Corrective action for contractors and volunteers</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Professional Conduct Policy 1.00.110.204, dated 1.18.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Director of Alternative Sentencing</li> </ol> <p>Interviews with the Director of Alternative Sentencing demonstrated the facility has had one contractor who has been disciplined for violation of an agency zero tolerance policy in the past 12 months. The Director of Alternative Sentencing stated contractors and volunteers involved in a substantiated sexual abuse incident would never be allowed back into the facility again, and appropriate licensing agencies, law enforcement, the Community Confinement Board and the Department of Criminal Justice would be notified.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, contractors or volunteers have not been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of residents was one. During the pre-audit phase the agency stated the contract worker in this instance was a kitchen</p> |

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|  | <p>worker, the kitchen manager was notified; however, no licensing body was applicable with this case.</p> <p>Please refer to §115.276 for policy compliance as this agency holds contractors and volunteers to the same standards as employees.</p> <p>(b) The Larimer County Community Justice Alternatives PAQ the facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.278</b> | <b>Disciplinary sanctions for residents</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternative Sentencing Department Work Release Client Handbook, dated March 2024</li> <li>4. Larimer County Community Corrections Resident Guidebook, dated 2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Director of Alternative Sentencing</li> </ol> <p>The interview with the Program Director demonstrated clients involved in a substantiated sexual abuse incident would discharge, their Probation and Parole Officers and local law enforcement would be notified as well as the Community Confinement Board and the Department of Criminal Justice.</p> |

(a-b) The Larimer County Community Justice Alternatives PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months, the number of administrative findings of resident-on-resident sexual abuse that have occurred at the facility was one. In the past 12 months, the number of criminal findings guilty of resident-on-resident sexual abuse that have occurred at the facility was zero. The PAQ states, "Due to criminal charges, the individual will be terminated."

(c) The Larimer County Community Justice Alternatives PAQ states, "The facility does not offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse."

(d) The Larimer County Community Justice Alternatives PAQ states the agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

The facility provided a Larimer County Community Justice Alternative Sentencing Department Work Release Client Handbook, and a County Community Corrections Resident Guidebook. Both handbooks state the following information. "The Prison Rape Elimination Act (PREA) of 2003 establishes zero tolerance for sexual behavior between clients, or clients and staff/volunteers/visitors regardless of whether such conduct was consensual. Any type of consensual sexual conduct, sexual assault, sexual misconduct or sexual harassment are considered prohibited sexual behavior and will be subject to disciplinary action and possible criminal action."

(e) Larimer County Community Justice Alternatives PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Larimer County Community Justice Alternatives PREA Policy, page 6, section D., states, "Unfounded, deliberately malicious, or false reports by clients or other parties may result in disciplinary action or criminal charges."

(f) Larimer County Community Justice Alternatives PAQ states the agency

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|  | <p>prohibits all sexual activity between residents.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.282</b> | <b>Access to emergency medical and mental health services</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives First Responder Checklist for a PREA Incident, dated 9.2023</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Program Manager / PREA Coordinator</li> </ol> <p>The interview with the PREA Coordinator demonstrated clients would be transported to UC Health for forensic exams.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. The facility would always refer out to local mental health or the emergency room for medical and mental health emergency situations.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 9, section F., states, "All programs shall allow unimpeded access to all community medical and mental health care, consistent with program rules and requirements."</p> <p>(c) The Larimer County Community Justice Alternatives PAQ states, resident victims of sexual abuse while incarcerated are offered timely information about and timely</p> |



access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

The facility provided a First Responder Checklist for a PREA Incident. Page two prompts personnel to provide a SAVA brochure and offers a confidential call to the victim.

(d) The Larimer County Community Justice Alternatives PAQ states treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Through such reviews, the facility meets standard requirements.

Standard 115.283: Ongoing medical and mental health care for sexual abuse victims and abusers

Document Review:

1. Larimer County Community Justice Alternatives PAQ
2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 9.24.2024

Interviews:

1. Random Clients
2. Targeted Client
3. Program Manager / PREA Coordinator

Interviews with clients demonstrated none had reported sexual abuse.

The interview with the PREA Coordinator demonstrated victims would be offered ongoing medical and mental health services through UC Health and the local Sexual Abuse Victim Advocacy center.

(a) The Larimer County Community Justice Alternatives PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

Larimer County Community Justice Alternatives PREA Policy, page 9, section G., states, "Females victims of sexually abusive vaginal penetration and victims of sexual abuse while residing in our care are offered pregnancy tests and test for sexually transmitted infections as medically appropriate."

(d) The Larimer County Community Justice Alternatives PAQ states female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests.

(c) The Larimer County Community Justice Alternatives PAQ states If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.

(f) The Larimer County Community Justice Alternatives PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

(h) This Larimer County Community Justice Alternatives PAQ states the facility does not attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.

Through such reviews, the facility meets standard requirements.

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| <b>115.283</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 9.24.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Clients</li> <li>2. Targeted Client</li> <li>3. Program Manager / PREA Coordinator</li> </ol> <p>Interviews with clients demonstrated none had reported sexual abuse.</p> <p>The interview with the PREA Coordinator demonstrated victims would be offered ongoing medical and mental health services through UC Health and the local Sexual Abuse Victim Advocacy center.</p> <p>(a) The Larimer County Community Justice Alternatives PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p style="padding-left: 40px;">Larimer County Community Justice Alternatives PREA Policy, page 9, section G., states, “Females victims of sexually abusive vaginal penetration and victims of sexual abuse while residing in our care are offered pregnancy tests and test for sexually transmitted infections as medically appropriate.”</p> <p>(d) The Larimer County Community Justice Alternatives PAQ states female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests.</p> |

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|  | <p>(c) The Larimer County Community Justice Alternatives PAQ states If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.</p> <p>(f) The Larimer County Community Justice Alternatives PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.</p> <p>(h) This Larimer County Community Justice Alternatives PAQ states the facility does not attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.286</b> | <b>Sexual abuse incident reviews</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives PREA Incident Debriefing Report, dated 11.2020</li> <li>4. Larimer County Community Justice Alternatives PREA Annual Report, dated 2023 to 2024</li> <li>5. Post Audit: Revised Larimer County Community Justice Alternatives PREA Incident Debriefing Form, dated 1.2024</li> <li>6. Post Audit: Completed Sexual Abuse Incident Reviews</li> <li>7. Post Audit: Larimer County Community Justice Alternatives Memorandum,</li> </ol> |

Subject: 2024 PREA Audit Action Plan, dated 10.10.2024

Interviews:

1. Program Manager / PREA Coordinator

The PREA Coordinator clearly articulated her review of all sexual abuse investigations are completed with all agency Program Directors and the PREA Team.

Site Observation:

Investigation file review demonstrated sexual abuse incident reviews are not completed for all sexual abuse investigations and or completed within 30 days of the date of the completion of the investigation. Sexual abuse incident reviews are not signed by each member of the administrative team completing a sexual abuse investigation.

Action Plan:

- Appropriate facility appropriate to complete documented training on all provisions of §115.286.
- Complete sexual abuse incident reviews for sexual abuse investigations that have not been completed in the past 12 months.
- Enhance the Debrief Form to include dates of when required documentation was completed.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.286. Memorandum must be dated, addressed to DOJ PREA Auditor, include the author's name and provision number. (Re: 115.286)
- Upload documentation to the online audit system in provision 115.286 (a).

Post audit appropriate facility personnel completed the required training per the corrective action plan. (Training uploaded in §115.271.)

Post audit the facility provided a revised PREA Incident Debriefing Report to include dates of when documentation within the investigation were completed.

Post audit the facility provided completed sexual abuse incident reviews for sexual abuse investigations that had not been completed in the past 12 months.

Post audit the facility provided a memorandum addressed to the DOJ PREA Auditor from the agency PREA Coordinator stating, "The agency's debriefing form has been revised to include signatures for each member of the incident review team and dates of when required documentation was completed. The PREA Coordinator will manage this requirement."

(a) The Larimer County Community Justice Alternatives PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been four criminal and administrative investigations of alleged sexual abuse completed at the facility,

Larimer County Community Justice Alternatives PREA Policy, page 4, section C. 1-5, states, "The Sexual Assault Response Team (SART) shall be comprised of members specifically trained in responding to sexual abuse and sexual harassment.

1. SART members shall include:

- a. PREA Coordinator
- b. PREA Managers (one to represent ASD, one to represent LCCC and one to represent treatment programs).
- c. CJA Victim Witness Specialists
- d. PREA Investigators

2. SART shall meet two times a month to discuss any PREA events, and/or efforts aimed at reducing and eliminating sexual abuse and sexual harassment in CJA facilities.

3. SART shall act as an advisory board and resource to:

- a. PREA Managers conducting administrative investigations into alleged incidents.
- b. Law Enforcement conducting criminal investigations into alleged incidents.
- c. Outside agencies or the public.

4. SART shall meet at the conclusion of all administrative and/or criminal investigations where a client is the alleged perpetrator to:

- a. Conduct a full incident review using the PREA Incident Debriefing Report (Form #LCCJA-41).
  - b. Ensure that all required follow-up steps are communicated to staff.
  - c. Explore alternatives to prevent incidents or improve the response to events in the future.
5. SART shall liaison with outside agencies and community partners as necessary to establish and maintain a community level of care for all victims of sexual abuse in CJA custody.”

The facility provided a Larimer County Community Justice Alternatives PREA Incident Debriefing Report. The report documents the following information.

- Date/Time of Incident
- Date/Time of Report
- Victim Name(s)/DOB
- Assailant Name(s)/DOB
- Incident Type
- Findings
- Brief Event Description
- Discussion Points for SART Team
- Final Findings/Recommended Remedies/Articulated Reasons for Not Making Changes:
- Final Checklist

The form is signed and dated by the PREA Coordinator.

(b) The Larimer County Community Justice Alternatives PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents was zero.

(c) The Larimer County Community Justice Alternatives PAQ states the sexual abuse incident review team includes upper-level management officials and allows

for input from line supervisors, investigators, and medical or mental health practitioners. Policy compliance can be found in provision (a) of this standard.

(d) The Larimer County Community Justice Alternatives PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA Coordinator.

The facility provided a Larimer County Community Justice Alternatives PREA Annual Report. The report includes the following information.

#### Background

#### Section 1 - Reporting Statistics

- 1.1 Number of Reports
- 1.2 Nature of Reports
- 1.3 Substantiated Reports
- 1.4 Unsubstantiated Reports
- 1.5 Unfounded Reports

#### Section 2 - Analysis of Data/Actions Taken

- 1.1 Number of Reports
- 1.2 Coordination of Response
- 1.3 Client Education
- 1.4 Staff Education

#### Conclusion

The Annual Report is signed and dated 5.20.2024 by the Community Justice Alternatives Director, Alternative Sentencing Director, Community Corrections Director.

(e) The Larimer County Community Justice Alternatives PAQ states, the facility



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|  | <p>implements recommendations for improvement or documents its reasons for not doing so.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.287</b> | <b>Data collection</b>   |
|                | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> <li>3. Larimer County Community Justice Alternatives PREA Tracker</li> </ol> <p>(a) The Larimer County Community Justice Alternatives PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 12, section XI. Data, Reporting, and Retention, A. through D., states,</p> <ol style="list-style-type: none"> <li>A. The PREA Coordinator shall collect accurate and uniform data for every allegation of sexual abuse at a CJA facility.</li> <li>B. Such data shall be collected and organized on CJA's secured network.</li> <li>C. Data shall be compiled from all incident reporting sources, including, but not limited to: <ol style="list-style-type: none"> <li>1. Police Reports</li> <li>2. Behavior Reports</li> <li>3. SART Reports</li> <li>4. Incident Review Reports</li> <li>5. Case Notes</li> </ol> </li> </ol> |

6. Emails or other electronic communication

D. Data shall be compiled and, annually in May, a preliminary report shall be issued from the PREA Coordinator to the CJA Director and Department Directors, which shall:

1. Compare current year data to previous year data
2. Compile a list of identified problem areas or areas for improvement
3. Identify corrective actions taken to address those areas
4. Document reasons (if any) for not taking corrective action”

(b) The Larimer County Community Justice Alternatives PAQ states the agency aggregates incident-based sexual abuse at least annually. Policy compliance can be found in provision (a) of this standard.

(c) The Larimer County Community Justice Alternatives PAQ states the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. Policy compliance can be found in provision (a) of this standard.

(d) The Larimer County Community Justice Alternatives PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy compliance can be found in provision (a) of this standard.

The facility provided a PREA Tracker that documents the following information.

- Victim name
- Assailant
- Date/Time of Report
- Investigator
- Outcome
- o Substantiated Harassment
- o Substantiated Abuse

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|  | <ul style="list-style-type: none"> <li>o Unsubstantiated Harassment</li> <li>o Unsubstantiated Abuse</li> <li>o Unfounded</li> <li>· Prior Institutional</li> </ul> <p>(e) This provision is not applicable as they do not have private facilities.</p> <p>(f) The Larimer County Community Justice Alternatives PAQ states the agency did not provide the Department of Justice (DOJ) with data from the previous calendar year upon request.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |
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| <b>115.288</b> | <b>Data review for corrective action</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Larimer County Community Justice Alternatives PAQ</li> <li>2. Larimer County Community Justice Alternatives PREA Policy, 1.00.140.101, dated 4.22.2024</li> </ol> <p>(a) The Larimer County Community Justice Alternatives PAQ states the agency reviews data collected and aggregated pursuant to §115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.</p> <p>(b) The Larimer County Community Justice Alternatives PAQ states the annual report includes a comparison of the current year’s data and corrective actions to those from prior years. The annual report provides an assessment of the agency’s</p> |

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|  | <p>progress in addressing sexual abuse. The annual report compares data 2022 and 2023 data. The annual report provides progress in addressing sexual abuse.</p> <p>(c) The Larimer County Community Justice Alternatives PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head.</p> <p>(d) The Larimer County Community Justice Alternatives PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p>Larimer County Community Justice Alternatives PREA Policy, page 12, section XI. Data, Reporting, and Retention, G., states, “Nothing in this section precludes redaction of any information which compromises the security and/or safety of the facility and/or staff.”</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.289</b> | <b>Data storage, publication, and destruction</b>  |
|                | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>Larimer County Community Justice Alternatives PAQ <ul style="list-style-type: none"> <li>(a) The Larimer County Community Justice Alternatives PAQ states the agency ensures that incident-based and aggregate data are securely retained.</li> </ul> </li> </ol> <p>Larimer County Community Justice Alternatives PREA Policy, page 12, section XI. Data, Reporting, and Retention, I., states, “All reports and data shall be maintained for a period of 10 years from the date of the final annual report.”</p> |

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|  | <p>(b) The Larimer County Community Justice Alternatives PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p>The Agency Annual Report is available on the following website at <a href="http://www.larimer.org/cja/PREA">www.larimer.org/cja/PREA</a></p> <p>(c) The Larimer County Community Justice Alternatives PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> <p>Through such reviews, the facility meets standard requirements.</p> |
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| <b>115.401</b> | <b>Frequency and scope of audits</b>  |
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|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p>(b) This is the fourth audit cycle for Larimer County Community Justice Alternatives and the third year of the fourth audit cycle.</p> <p>(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> |

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|  | <p>(n) Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |
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| <b>115.403</b> | <b>Audit contents and findings</b>  |
|                | <b>Auditor Overall Determination:</b> Meets Standard  |
|                | <b>Auditor Discussion</b>   |
|                | <p>(b) The agency has posted the current 2021 PREA audit report, on their website.</p> <p>Through such reviews, the facility meets the standard requirements.</p> |

| <b>Appendix: Provision Findings</b> |  |     |
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| <b>115.211<br/>(a)</b>              | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>  |     |
|                                     | 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 |
| <b>115.211<br/>(b)</b>              | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>  |     |
|                                     | 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 community confinement facilities?   | yes |
| <b>115.212<br/>(a)</b>              | <b>Contracting with other entities for the confinement of residents</b>  |     |
|                                     | If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.) | na  |
| <b>115.212<br/>(b)</b>              | <b>Contracting with other entities for the confinement of residents</b>  |     |
|                                     | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)  | na  |
| <b>115.212<br/>(c)</b>              | <b>Contracting with other entities for the confinement of residents</b>  |     |
|                                     | If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in  | na  |

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|                    | emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.) |     |
|                    | In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)                     | na  |
| <b>115.213 (a)</b> | <b>Supervision and monitoring</b>   |     |
|                    | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?  | yes |
|                    | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?  | yes |
|                    | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?  | 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 |
| <b>115.213 (b)</b> | <b>Supervision and monitoring</b>   |     |
|                    | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)   | yes |
| <b>115.213 (c)</b> | <b>Supervision and monitoring</b>   |     |
|                    | In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to prevailing   | yes |



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|                    | staffing patterns?  |     |
|                    | In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?   | yes |
| <b>115.215 (a)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                    | Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?  | yes |
| <b>115.215 (b)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                    | Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)   | yes |
|                    | Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)  | yes |
| <b>115.215 (c)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                    | 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 residents?  | yes |
| <b>115.215 (d)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                    | Does the facility have policies that enable residents to shower, perform bodily functions, 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? | yes |
|                    | Does the facility have procedures that enable residents to shower,  | yes |

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|                    | perform bodily functions, 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?  |     |
|                    | Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?  | yes |
| <b>115.215 (e)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                    | Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?  | yes |
|                    | If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, 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 |
| <b>115.215 (f)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                    | 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 residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |
| <b>115.216 (a)</b> | <b>Residents with disabilities and residents who are limited English proficient</b>   |     |
|                    | Does the agency take appropriate steps to ensure that residents 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: Residents who are deaf or hard of hearing?  | yes |
|                    | Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision? | yes |

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|                        | Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities?                      | yes |
|                        | Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities?                       | yes |
|                        | Does the agency take appropriate steps to ensure that residents 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: Residents who have speech disabilities?                            | yes |
|                        | Does the agency take appropriate steps to ensure that residents 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 residents 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 residents with disabilities including residents who: Have intellectual disabilities?   | yes |
|                        | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents 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 residents with disabilities including residents who: Who are blind or have low vision?   | yes |
| <b>115.216<br/>(b)</b> | <b>Residents with disabilities and residents who are limited English proficient</b>  |     |

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|                        | 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 residents 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 |
| <b>115.216<br/>(c)</b> | <b>Residents with disabilities and residents who are limited English proficient</b>  |     |
|                        | Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations? | yes |
| <b>115.217<br/>(a)</b> | <b>Hiring and promotion decisions</b>  |     |
|                        | Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?  | yes |
|                        | Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents 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 the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of  | yes |

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|                    | force, or coercion, or if the victim did not consent or was unable to consent or refuse?   |     |
|                    | Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?   | yes |
| <b>115.217 (b)</b> | <b>Hiring and promotion decisions</b>  |     |
|                    | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?  | yes |
|                    | Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?   | yes |
| <b>115.217 (c)</b> | <b>Hiring and promotion decisions</b>  |     |
|                    | Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?   | yes |
|                    | Before hiring new employees who may have contact with residents, 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 |
| <b>115.217 (d)</b> | <b>Hiring and promotion decisions</b>  |     |
|                    | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?   | yes |
| <b>115.217 (e)</b> | <b>Hiring and promotion decisions</b>  |     |
|                    | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?   | yes |
| <b>115.217</b>     | <b>Hiring and promotion decisions</b>  |     |

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| <b>(f)</b>         |  |     |
|                    | Does the agency ask all applicants and employees who may have contact with residents 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 residents 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 |
| <b>115.217 (g)</b> | <b>Hiring and promotion decisions</b>  |     |
|                    | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  | yes |
| <b>115.217 (h)</b> | <b>Hiring and promotion decisions</b>  |     |
|                    | 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 |
| <b>115.218 (a)</b> | <b>Upgrades to facilities and technology</b>   |     |
|                    | 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 residents 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 |
| <b>115.218 (b)</b> | <b>Upgrades to facilities and technology</b>   |     |
|                    | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the  | yes |

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|                    | agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)  |     |
| <b>115.221 (a)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                    | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)   | yes |
| <b>115.221 (b)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                    | Is this protocol developmentally appropriate for youth where applicable? (NA 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? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.) | yes |
| <b>115.221 (c)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                    | 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 |

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|                    | Has the agency documented its efforts to provide SAFEs or SANEs?   | yes |
| <b>115.221 (d)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                    | 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?   | yes |
|                    | Has the agency documented its efforts to secure services from rape crisis centers?   | yes |
| <b>115.221 (e)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                    | 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 |
| <b>115.221 (f)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                    | 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 |
| <b>115.221 (h)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                    | 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above). | yes |



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| <b>115.222<br/>(a)</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |     |
|                        | 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 |
| <b>115.222<br/>(b)</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |     |
|                        | Does the agency have a policy 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 |
| <b>115.222<br/>(c)</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |     |
|                        | 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 conducting criminal investigations. See 115.221(a).)        | yes |
| <b>115.231<br/>(a)</b> | <b>Employee training</b>  |     |
|                        | Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?   | yes |
|                        | Does the agency train all employees who may have contact with residents 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 residents on: Residents' right to be free from sexual abuse and sexual harassment?  | yes |
|                        | Does the agency train all employees who may have contact with   | yes |

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|                    | residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  |     |
|                    | Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?  | yes |
|                    | Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?   | yes |
|                    | Does the agency train all employees who may have contact with residents 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 residents on: How to avoid inappropriate relationships with residents?  | yes |
|                    | Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents? | yes |
|                    | Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?   | yes |
| <b>115.231 (b)</b> | <b>Employee training</b>  |     |
|                    | Is such training tailored to the gender of the residents at the employee's facility?  | yes |
|                    | Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?   | yes |
| <b>115.231 (c)</b> | <b>Employee training</b>  |     |
|                    | Have all current employees who may have contact with residents 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,  | yes |

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|                    | does the agency provide refresher information on current sexual abuse and sexual harassment policies?   |     |
| <b>115.231 (d)</b> | <b>Employee training</b>  |     |
|                    | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?   | yes |
| <b>115.232 (a)</b> | <b>Volunteer and contractor training</b>  |     |
|                    | Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?   | yes |
| <b>115.232 (b)</b> | <b>Volunteer and contractor training</b>  |     |
|                    | Have all volunteers and contractors who have contact with residents 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 residents)? | yes |
| <b>115.232 (c)</b> | <b>Volunteer and contractor training</b>  |     |
|                    | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?   | yes |
| <b>115.233 (a)</b> | <b>Resident education</b>   |     |
|                    | During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  | yes |
|                    | During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?   | yes |
|                    | During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?  | yes |

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|                    | During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?  | yes |
|                    | During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?  | yes |
| <b>115.233 (b)</b> | <b>Resident education</b>   |     |
|                    | Does the agency provide refresher information whenever a resident is transferred to a different facility?   | yes |
| <b>115.233 (c)</b> | <b>Resident education</b>   |     |
|                    | Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?   | yes |
|                    | Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?   | yes |
|                    | Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?  | yes |
|                    | Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?   | yes |
|                    | Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?  | yes |
| <b>115.233 (d)</b> | <b>Resident education</b>   |     |
|                    | Does the agency maintain documentation of resident participation in these education sessions?   | yes |
| <b>115.233 (e)</b> | <b>Resident education</b>   |     |
|                    | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats? | yes |
| <b>115.234 (a)</b> | <b>Specialized training: Investigations</b>   |     |
|                    | In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent  | yes |

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|                    | 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 criminal or administrative sexual abuse investigations. See 115.221(a)).   |     |
| <b>115.234 (b)</b> | <b>Specialized training: Investigations</b>  |     |
|                    | Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(a)).  | yes |
| <b>115.234 (c)</b> | <b>Specialized training: Investigations</b>  |     |
|                    | 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 criminal or administrative sexual abuse investigations. See 115.221(a).)  | yes |
| <b>115.235 (a)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                    | 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.) | na  |

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|                    | 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.)  | na |
|                    | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | na |
|                    | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)      | na |
| <b>115.235 (b)</b> | <b>Specialized training: Medical and mental health care</b>  |    |
|                    | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)   | na |
| <b>115.235 (c)</b> | <b>Specialized training: Medical and mental health care</b>  |    |
|                    | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)   | na |
| <b>115.235 (d)</b> | <b>Specialized training: Medical and mental health care</b>  |    |
|                    | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)   | na |
|                    | Do medical and mental health care practitioners contracted by  | na |

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|                    | and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.) |     |
| <b>115.241 (a)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?   | yes |
|                    | Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?  | yes |
| <b>115.241 (b)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | Do intake screenings ordinarily take place within 72 hours of arrival at the facility?   | yes |
| <b>115.241 (c)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | Are all PREA screening assessments conducted using an objective screening instrument?  | yes |
| <b>115.241 (d)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?           | yes |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?  | yes |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?   | yes |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?                              | yes |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:   | yes |

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|                    | Whether the resident's criminal history is exclusively nonviolent?  |     |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:<br>Whether the resident 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 residents for risk of sexual victimization:<br>Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident 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 residents for risk of sexual victimization:<br>Whether the resident has previously experienced sexual victimization?   | yes |
|                    | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?  | yes |
| <b>115.241 (e)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                    | In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?   | yes |
|                    | In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?   | yes |
|                    | In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?  | yes |
| <b>115.241 (f)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                    | Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?   | yes |



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| <b>115.241 (g)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | Does the facility reassess a resident's risk level when warranted due to a: Referral?  | yes |
|                    | Does the facility reassess a resident's risk level when warranted due to a: Request?   | yes |
|                    | Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?  | yes |
|                    | Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?  | yes |
| <b>115.241 (h)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | Is it the case that residents 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 |
| <b>115.241 (i)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                    | 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 resident's detriment by staff or other residents? | yes |
| <b>115.242 (a)</b> | <b>Use of screening information</b>  |     |
|                    | Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?                 | yes |

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|                    | Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?  | yes |
| <b>115.242 (b)</b> | <b>Use of screening information</b>  |     |
|                    | Does the agency make individualized determinations about how to ensure the safety of each resident?  | yes |
| <b>115.242 (c)</b> | <b>Use of screening information</b>  |     |
|                    | When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?   | yes |
| <b>115.242 (d)</b> | <b>Use of screening information</b>  |     |
|                    | Are each transgender or intersex resident'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 |
| <b>115.242 (e)</b> | <b>Use of screening information</b>  |     |
|                    | Are transgender and intersex residents given the opportunity to shower separately from other residents?  | yes |
| <b>115.242</b>     | <b>Use of screening information</b>  |     |

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| <b>(f)</b>         |  |     |
|                    | 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 residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents 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 residents 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 residents, does the agency always refrain from placing: transgender residents 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 residents 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 residents, does the agency always refrain from placing: intersex residents 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 residents pursuant to a consent decree, legal settlement, or legal judgement.)                   | yes |
| <b>115.251 (a)</b> | <b>Resident reporting</b>  |     |
|                    | Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?  | yes |
|                    | Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?  | yes |
|                    | Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?  | yes |
| <b>115.251 (b)</b> | <b>Resident reporting</b>  |     |

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|                        | Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials?   | yes |
|                        | Does that private entity or office allow the resident to remain anonymous upon request?  | yes |
| <b>115.251<br/>(c)</b> | <b>Resident reporting</b>  |     |
|                        | Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  | yes |
|                        | Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?   | yes |
| <b>115.251<br/>(d)</b> | <b>Resident reporting</b>  |     |
|                        | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?  | yes |
| <b>115.252<br/>(a)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                        | Is the agency exempt from this standard?<br>NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | yes |
| <b>115.252<br/>(b)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                        | Does the agency permit residents 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 a resident to use any informal grievance process, or to otherwise attempt to resolve   | yes |

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|                    | with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)   |     |
| <b>115.252 (c)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                    | Does the agency ensure that: a resident 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 |
| <b>115.252 (d)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                    | 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 residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)                           | yes |
|                    | If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) | yes |
|                    | At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.252 (e)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                    | Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents 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 residents? (If a third party files such a request on behalf  | yes |

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|                    | of a resident, 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.)   |     |
|                    | If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.252 (f)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                    | Has the agency established procedures for the filing of an emergency grievance alleging that a resident 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 a resident 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? (N/A if agency is exempt from this standard.)   | yes |
|                    | Does the initial response and final agency decision document the agency's determination whether the resident 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 |
| <b>115.252 (g)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                    | If the agency disciplines a resident for filing a grievance related to  | yes |

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|                    | alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  |     |
| <b>115.253 (a)</b> | <b>Resident access to outside confidential support services</b>   |     |
|                    | Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents 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 enable reasonable communication between residents and these organizations, in as confidential a manner as possible?   | yes |
| <b>115.253 (b)</b> | <b>Resident access to outside confidential support services</b>   |     |
|                    | Does the facility inform residents, 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 |
| <b>115.253 (c)</b> | <b>Resident access to outside confidential support services</b>   |     |
|                    | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?  | yes |
|                    | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  | yes |
| <b>115.254 (a)</b> | <b>Third party reporting</b>  |     |
|                    | 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 a resident?  | yes |
| <b>115.261 (a)</b> | <b>Staff and agency reporting duties</b>  |     |
|                    | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or   | yes |

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|                    | information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?   |     |
|                    | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents 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 |
| <b>115.261 (b)</b> | <b>Staff and agency reporting duties</b>   |     |
|                    | Apart from reporting to designated supervisors or officials, do 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 |
| <b>115.261 (c)</b> | <b>Staff and agency reporting duties</b>   |     |
|                    | 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 residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  | yes |
| <b>115.261 (d)</b> | <b>Staff and agency reporting duties</b>   |     |
|                    | 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 |
| <b>115.261 (e)</b> | <b>Staff and agency reporting duties</b>   |     |
|                    | 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 |



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| <b>115.262<br/>(a)</b> | <b>Agency protection duties</b>   |     |
|                        | When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?  | yes |
| <b>115.263<br/>(a)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                        | Upon receiving an allegation that a resident 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 |
| <b>115.263<br/>(b)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                        | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?   | yes |
| <b>115.263<br/>(c)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                        | Does the agency document that it has provided such notification?  | yes |
| <b>115.263<br/>(d)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                        | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  | yes |
| <b>115.264<br/>(a)</b> | <b>Staff first responder duties</b>   |     |
|                        | Upon learning of an allegation that a resident 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 a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?                       | yes |
|                        | Upon learning of an allegation that a resident 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,    | yes |

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|                        | 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?  |     |
|                        | Upon learning of an allegation that a resident 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 |
| <b>115.264<br/>(b)</b> | <b>Staff first responder duties</b>  |     |
|                        | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?   | yes |
| <b>115.265<br/>(a)</b> | <b>Coordinated response</b>  |     |
|                        | 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 |
| <b>115.266<br/>(a)</b> | <b>Preservation of ability to protect residents from contact with abusers</b>  |     |
|                        | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?                           | no  |
| <b>115.267<br/>(a)</b> | <b>Agency protection against retaliation</b>   |     |
|                        | Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?   | yes |

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|                    | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| <b>115.267 (b)</b> | <b>Agency protection against retaliation</b>  |     |
|                    | Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |
| <b>115.267 (c)</b> | <b>Agency protection against retaliation</b>  |     |
|                    | 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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 resident 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:4. Monitor resident 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 resident program changes?   | yes |

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|                    | 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 reassignment of staff?   | yes |
|                    | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?   | yes |
| <b>115.267 (d)</b> | <b>Agency protection against retaliation</b>   |     |
|                    | In the case of residents, does such monitoring also include periodic status checks?  | yes |
| <b>115.267 (e)</b> | <b>Agency protection against retaliation</b>   |     |
|                    | 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 |
| <b>115.271 (a)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | 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 115.221(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 115.221(a). )  | yes |
| <b>115.271 (b)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?   | yes |
| <b>115.271 (c)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | Do investigators gather and preserve direct and circumstantial   | yes |

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|                    | 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 |
| <b>115.271 (d)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | 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 |
| <b>115.271 (e)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | 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 resident or staff?   | yes |
|                    | Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?                                      | yes |
| <b>115.271 (f)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | 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 |
| <b>115.271 (g)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                    | 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 |
| <b>115.271</b>     | <b>Criminal and administrative agency investigations</b>   |     |

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| <b>(h)</b>         |   |     |
|                    | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  | yes |
| <b>115.271 (i)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                    | Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?   | yes |
| <b>115.271 (j)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                    | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?  | yes |
| <b>115.271 (l)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                    | 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 any form of administrative or criminal sexual abuse investigations. See 115.221(a).) | yes |
| <b>115.272 (a)</b> | <b>Evidentiary standard for administrative investigations</b>   |     |
|                    | 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 |
| <b>115.273 (a)</b> | <b>Reporting to residents</b>   |     |
|                    | Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  | yes |
| <b>115.273 (b)</b> | <b>Reporting to residents</b>   |     |
|                    | If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency   | yes |

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|                    | request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  |     |
| <b>115.273 (c)</b> | <b>Reporting to residents</b>   |     |
|                    | Following a resident'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 staff member is no longer posted within the resident's unit?  | yes |
|                    | Following a resident'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 staff member is no longer employed at the facility?   | yes |
|                    | Following a resident'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 a resident'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 |
| <b>115.273 (d)</b> | <b>Reporting to residents</b>   |     |
|                    | Following a resident's allegation that he or she has been sexually abused by another resident, 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 a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform  | yes |

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|                    | the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?  |     |
| <b>115.273 (e)</b> | <b>Reporting to residents</b>   |     |
|                    | Does the agency document all such notifications or attempted notifications?   | yes |
| <b>115.276 (a)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                    | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  | yes |
| <b>115.276 (b)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                    | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  | yes |
| <b>115.276 (c)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                    | 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 |
| <b>115.276 (d)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                    | 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 |
| <b>115.277 (a)</b> | <b>Corrective action for contractors and volunteers</b>   |     |



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|                    | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?   | 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 |
| <b>115.277 (b)</b> | <b>Corrective action for contractors and volunteers</b>  |     |
|                    | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?                                 | yes |
| <b>115.278 (a)</b> | <b>Disciplinary sanctions for residents</b>  |     |
|                    | Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process? | yes |
| <b>115.278 (b)</b> | <b>Disciplinary sanctions for residents</b>  |     |
|                    | Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?   | yes |
| <b>115.278 (c)</b> | <b>Disciplinary sanctions for residents</b>  |     |
|                    | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?  | yes |
| <b>115.278 (d)</b> | <b>Disciplinary sanctions for residents</b>  |     |
|                    | 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 resident to participate in such interventions as a           | no  |

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|                    | condition of access to programming and other benefits?  |     |
| <b>115.278 (e)</b> | <b>Disciplinary sanctions for residents</b>   |     |
|                    | Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?  | yes |
| <b>115.278 (f)</b> | <b>Disciplinary sanctions for residents</b>   |     |
|                    | 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 |
| <b>115.278 (g)</b> | <b>Disciplinary sanctions for residents</b>   |     |
|                    | Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)   | yes |
| <b>115.282 (a)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                    | Do resident 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 |
| <b>115.282 (b)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                    | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?  | yes |
|                    | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  | yes |
| <b>115.282 (c)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                    | Are resident victims of sexual abuse offered timely information   | yes |

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|                    | about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?   |     |
| <b>115.282 (d)</b> | <b>Access to emergency medical and mental health services</b>  |     |
|                    | 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 |
| <b>115.283 (a)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |     |
|                    | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?   | no  |
| <b>115.283 (b)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |     |
|                    | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?   | no  |
| <b>115.283 (c)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |     |
|                    | Does the facility provide such victims with medical and mental health services consistent with the community level of care?  | no  |
| <b>115.283 (d)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |     |
|                    | Are resident 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 residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | yes |
| <b>115.283 (e)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |     |
|                    | If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive  | yes |

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|                    | 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 residents 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.) |     |
| <b>115.283 (f)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                    | Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes |
| <b>115.283 (g)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                    | 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 |
| <b>115.283 (h)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                    | Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?  | no  |
| <b>115.286 (a)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                    | 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 |
| <b>115.286 (b)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                    | Does such review ordinarily occur within 30 days of the conclusion of the investigation?  | yes |
| <b>115.286 (c)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                    | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?   | yes |

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| <b>115.286<br/>(d)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                        | 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 §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?    | yes |
| <b>115.286<br/>(e)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                        | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  | yes |
| <b>115.287<br/>(a)</b> | <b>Data collection</b>  |     |
|                        | 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 |
| <b>115.287<br/>(b)</b> | <b>Data collection</b>  |     |
|                        | Does the agency aggregate the incident-based sexual abuse data at least annually?   | yes |
| <b>115.287</b>         | <b>Data collection</b>  |     |

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| <b>(c)</b>         |   |     |
|                    | 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 |
| <b>115.287 (d)</b> | <b>Data collection</b>  |     |
|                    | 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 |
| <b>115.287 (e)</b> | <b>Data collection</b>  |     |
|                    | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)  | na  |
| <b>115.287 (f)</b> | <b>Data collection</b>  |     |
|                    | 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.)  | na  |
| <b>115.288 (a)</b> | <b>Data review for corrective action</b>  |     |
|                    | Does the agency review data collected and aggregated pursuant to § 115.287 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 § 115.287 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 § 115.287 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 |

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| <b>115.288<br/>(b)</b> | <b>Data review for corrective action</b>  |     |
|                        | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?   | yes |
| <b>115.288<br/>(c)</b> | <b>Data review for corrective action</b>  |     |
|                        | 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 |
| <b>115.288<br/>(d)</b> | <b>Data review for corrective action</b>  |     |
|                        | 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 |
| <b>115.289<br/>(a)</b> | <b>Data storage, publication, and destruction</b>   |     |
|                        | Does the agency ensure that data collected pursuant to § 115.287 are securely retained?   | yes |
| <b>115.289<br/>(b)</b> | <b>Data storage, publication, and destruction</b>   |     |
|                        | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? | yes |
| <b>115.289<br/>(c)</b> | <b>Data storage, publication, and destruction</b>   |     |
|                        | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  | yes |
| <b>115.289<br/>(d)</b> | <b>Data storage, publication, and destruction</b>   |     |
|                        | Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  | yes |

|                    |  |     |
|--------------------|--|-----|
| <b>115.401 (a)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | 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 |
| <b>115.401 (b)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)  | no  |
|                    | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)      | na  |
|                    | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | yes |
| <b>115.401 (h)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Did the auditor have access to, and the ability to observe, all areas of the audited facility?   | yes |
| <b>115.401 (i)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?   | yes |
| <b>115.401 (m)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Was the auditor permitted to conduct private interviews with residents?  | yes |
| <b>115.401 (n)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the  | yes |



|                        |   |     |
|------------------------|---|-----|
|                        | same manner as if they were communicating with legal counsel?   |     |
| <b>115.403<br/>(f)</b> | <b>Audit contents and findings</b>  |     |
|                        | 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 |