

PREA AUDIT REPORT Interim Final

ADULT PRISONS & JAILS

Date of report: 10/18/16

Auditor Information			
Auditor name: ERIC WOODFORD			
Address: PO BOX 732 BENICIA CA 94510-0732			
Email: eiw@comcast.net			
Telephone number: (707) 333-8303.			
Date of facility visit: 4/25/16 – 4/27/16			
Facility Information			
Facility name: Wayne Brown Correctional Facility			
Facility physical address: 925 Maidu Drive Nevada City, CA 95959			
Facility mailing address: (if different from above) PO Box 928 Nevada City, CA 95959			
Facility telephone number: (530) 265-1291			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Shannon Moon			
Number of staff assigned to the facility in the last 12 months: 62			
Designed facility capacity: 288			
Current population of facility: 221			
Facility security levels/inmate custody levels: Minimum, Medium, Maximum			
Age range of the population: 20 - 60			
Name of PREA Compliance Manager: Sze Sze Weid		Title: Administrative Sergeant	
Email address: zsazsa.wied@co.nevada.ca.us		Telephone number: (530) 265-1291 x1915	
Agency Information			
Name of agency: Nevada County Sheriff's Office			
Governing authority or parent agency: (if applicable) Click here to enter text.			
Physical address: 950 Maidu Avenue Nevada City, CA 95959			
Mailing address: (if different from above) Click here to enter text.			
Telephone number: (530) 265-1471			
Agency Chief Executive Officer			
Name: Keith Royal		Title: Sheriff	
Email address: keith.royal@co.nevada.ca.us		Telephone number: (530) 265-1291 x1915	
Agency-Wide PREA Coordinator			
Name: Gary Smith		Title: Lieutenant	
Email address: gary.smith@co.nevada.ca.us		Telephone number: (530) 470-2616	

AUDIT FINDINGS

NARRATIVE

The Wayne Brown Detention Facility PREA On-Site Audit was conducted from 4/25/16 to 4/27/16. During the Pre-Audit Phase, the PREA Coordinator provided the Pre-Audit Questionnaire for review by the auditor. On 3/12/16 Notices of the Audit was posted in general areas of the facility accessible to both residents and staff. Notices were provided in English and Spanish. PREA Coordinator provided auditor with dated photos of Notice locations. Auditor and PREA Coordinator communicated throughout the Pre-Audit phase to discuss clarification issues with the Pre-Audit Questionnaire and to correct deficiencies identified prior to the On-Site Audit Phase. The audit began on 4/25/16 with short entry briefing with the PREA Coordinator as facility management staff was otherwise occupied with pressing Agency matters. A summary of the complete Audit process was explained. The Pre-Audit, On-Site Audit, Post-Audit and Corrective Action phases were explained and discussed. Auditor went into detail explaining how an auditor conducts each stage of the On-Site audit process. All questions were answered and the physical plant review began.

Following the physical plant review, interviews comprised of a sampling of 15 random inmates of varying characteristics and sampling of 12 random staff selected from each shift were conducted. On 4/26/16 Auditor completed the resident & staff interviews, then conducted 20 Specialized Staff and Agency management interviews. During resident interviews, an Advocate from Domestic Violence and Sexual Assault Coalition was available for emotional support if needed. No referrals for advocacy occurred during the interview process. Following the interviews, the auditor conducted a review of 20 Personnel files, 15 screening records, 10 investigative files and 20 training records. Document reviews were conducted for both Wayne Brown Detention Facility and Truckee Substation Facility on 4/27/16. Following the document reviews, auditor traveled to the Truckee Substation Facility to conduct a Lockup Facility Review. During the Post-Audit phase, PREA Coordinator and Auditor collaborated on issues found during the On-Site Audit review, interviews and document review. Agency conducted a number of corrections prior to auditor issuing the Interim Report by May 29, 2016.

Resident population at time of physical plant review was 221 (44 female inmates and 177 male inmates). Physical Plant Review was conducted as follows:

ALL HALLWAYS LEADING TO PODS ARE MONITORED BY MULTIPLE CAMERAS. DOORS TO POD ACCESS ARE CONTROLLED BY CENTRAL CONTROL. ACCESS TO POD SECTIONS ARE CONTROLLED BY POD OFFICER AND CAN BE CONTROLLED BY CENTRAL CONTROL.

Living Unit: B-POD

Sections: C – Intake & General Population, D – Disciplinary, E – Ad-Seg (prior victimization), F – Ad-Seg (Sex Crimes), G – Female Max

PREA Information Posted? PREA information posted in each section on wall next to central area Day Room phones

Auditor Notice Posted? Posted in each housing unit section

Opposite Sex Viewing? Bathrooms in each housing unit section PREA compliant. Bathrooms in each cell PREA compliant as long as officer makes announcement when entering the Section.

Camera Placement? Multiple cameras in control area and in each housing section

Announcement made? NO How: Auditor observed female officer entering male housing section to make count. No announcement made.

Informal Discussion with Staff (Not Interviews): Female staff indicate no announcements made when entering male housing units.

General Discussion with Inmates (Not Interviews): Inmates indicate they feel safe in housing unit and understand reporting methods provided by agency.

Phones: Auditor checked phones to verify toll free numbers for victim advocacy and reporting work and phones are not
PREA Audit Report

monitored. Facility phones are PREA compliant as auditor spoke and interviewed Moving to end Sexual Harassment hotline worker.

Grievance Process: Inmates must obtain grievance form from officer and submit completed grievance to auditor for response. This process fails to provide inmate to anonymously submit a grievance anonymously.

Supervision (staff to inmate ratio): One officer on duty in control & 1 officer that is a rover between PODs.

Showers and Bathrooms (privacy, opposite gender viewing?): Compliant

Recreation Areas/TV/Multi-Purpose: Each section has recreation/Day-room area accessible to all inmates assigned to that section.

Living Unit: N-Section – Minimum Security

8 – Dorms: 102, 103, 203, 104, 204 all male dorms. Male officers only conduct count for those dorms.

101, 201, 202 all female dorms. Female officers only conduct count for those dorms

PREA Information Posted? Auditor verified PREA posting in each dorm and Day room. Monitoring & confidentiality information provided on these posters

Auditor Notice Posted? Auditor verified Notice of Auditor provided in each Day Room and housing dorm

Opposite Sex Viewing? No opportunity for cross-gender viewing

Camera Placement? Multiple cameras provided in each dorm, multi-purpose room, recreation center and Day Room.

Announcement made? YES How: Auditor observed Cross Gender announcements. Officers ensure there is no cross-gender viewing as female officers conduct cross-gender announcement prior to any male staff entering housing unit and same for the male side.

Informal Discussion with Staff (Not Interviews): Staff indicate cross-gender viewing prohibited except in exigent circumstances. 2 staff on duty at all times, 1 male and 1 female.

General Discussion with Inmates (Not Interviews): Inmates verified their knowledge of Zero-tolerance, inmate rights and reporting rights as it relates to sexual abuse, harassment and retaliation in discussions with Auditor. Female inmates well versed in their PREA rights and reporting methods.

Phones: Phones provided in each dorm and in Day Room

Grievance Process: Inmates must obtain grievance form from officer and submit completed grievance to auditor for response. This process fails to provide inmate to anonymously submit a grievance anonymously.

Supervision (staff to inmate ratio): 2 officers on duty for each shift, 1 male and 1 female

Showers and Bathrooms (privacy, opposite gender viewing?): Showers and bathroom PREA compliant, no cross-gender viewing opportunities.

Recreation Areas/TV/Multi-Purpose: Each dorm section has Day Room with multiple cameras. Multi-purpose rooms have 2 cameras and panic button.

Laundry

Hidden areas? NONE

Camera Placement: 2 Cameras cover the entire laundry – 2 commercial washers, 2 commercial dryers

Supervision: Cameras and rover

Informal Discussion with inmates: Discussion with inmates by auditor determine their knowledge and education with regards to their rights and reporting methods. Inmates indicate they feel safe in the facility.

Informal Discussion with staff: No staff assigned to the laundry

Receiving and Discharge (Intake)

Strip Areas (Private?): Strip areas are the 3 changing rooms for inmate intake and discharge. Rooms are not monitored and determined to be BLIND SPOTS. Cameras only view hallway leading to these rooms.

Interview Areas (Confidential): Hallway cameras cover booking area interview room.

PREA Information Posted: PREA Posters provided in Intake Area.

Cameras: Interview room not monitored by camera and unused.

Receiving and Discharge (Cont.)

Phones?: Provided in intake

Ask for Information Provided to Offenders: Inmate handbook and PREA Pamphlet provided during Pre-Audit phase. PREA Signage provided next to intake waiting area phones. Should be provided next to phone across from Sgt office for privacy.

Holding cells?: Holding cells are non-compliant, provides for cross-gender viewing by both camera monitoring and direct viewing.

Camera Placement: Cameras in each holding cells provides for cross-gender viewing.

Visitation

Strip/Shakedown Area: N/A - No contact visiting in all visitation areas

PREA Information Posted? No PREA information in any visiting area

Third Party Information Posted? No 3rd Party reporting information provided in the public area of visiting.

Camera Placement: Cameras provided in hallway leading to non-contact visiting area.

Chapel/ Religious Services

Multi-Purpose Rooms: All services provided in Multi-purpose rooms in each POD

Education (Academic)

Classrooms: Multi-purpose rooms used as education areas and is covered by 2 cameras in each POD

Facilities (Mechanical Services)

Tool Rooms: Off each hallway, no inmates allowed.

Camera Placement: All hallways covered by multiple cameras viewed by Central Control and management

Storage Areas: Off main hallways, all covered by multiple cameras viewed by Central control and management

Food Service/Kitchen

Dining Rooms: Dining rooms are provided in each POD section.

Officer Dining Area: Zero-Tolerance Posters provided

Kitchen: Numerous cameras throughout kitchen. Blind Spots in gated dry storage and back storage dry storage.

Freezers: Shallow coolers (3), covered by cameras.

Dry Goods Storage: Blind Spots in gated dry storage and back storage dry storage across from freezers.

Garbage Area: Covered by multiple cameras on back dock.

Dish room: Covered by 2 cameras

Supervision: 1 Food Service staff on duty each 12-hour shift for 6 to 8 inmate workers – male workers in AM, female workers in PM.

Isolated areas: Both dry-storage areas

Restrictive Housing

Hearing Rooms: No cameras for attorney rooms

Health Services

Main entrance: Monitored by 2 cameras

Treatment Rooms: Two exam rooms, no cameras. Officer. Supervision during treatment

Infirmiry/Observation Rooms: 5 housing cells for medical needs. Cameras in each cell allows for cross-gender viewing.

Ancillary Areas: Day Room outside housing cells with direct supervision from medical staff and 2 cameras.

Recreation Yard

Bathrooms: Recreation yards for each POD. Bathrooms PREA compliant, no cross-gender viewing

Camera Placement: Cameras cover all yards

Hidden Areas?: NONE

Outside Areas

Power House?: NONE

Outside Mechanical Service Shops: NONE

Garage: Intake vehicle entrance is covered by multiple cameras

Training Center (if outside): NONE

Administration

Offender Access?: NONE

PREA Information: Zero Tolerance Staff posters

Following the physical plant review, interviews comprised of a sampling of 15 random inmates of varying characteristics and sampling of 12 random staff selected from each shift were conducted. On 4/26/16 Auditor completed the resident & staff interviews, then conducted 20 Specialized Staff and Agency management interviews. During resident interviews, an Advocate from Domestic Violence and Sexual Assault Coalition was available for emotional support if needed. No referrals for advocacy occurred during the interview process. Following the interviews, the auditor conducted a review of 20 Personnel files, 15 screening records, 10 investigative files and 20 training records. Document reviews were conducted for both Wayne Brown Detention Facility and Truckee Substation Facility on 4/27/16. Following the document reviews, auditor traveled to the Truckee Substation Facility to conduct a Lockup Facility Review. During the Post-Audit phase, PREA

Coordinator and Auditor collaborated on issues found during the On-Site Audit review, interviews and document review. Agency conducted a number of corrections prior to auditor issuing the Interim Report by May 29, 2016.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Wayne Brown Detention Facility was dedicated on December 17, 1991 as a Type II jail under the 1988 Title 24. Located at 950 Maidu Avenue Nevada City, California 95959. The facility houses those awaiting arraignment or trial, as well as those who have been sentenced. Medical services are available 24 hours a day, seven days a week provided by the California Forensic Medical Group under contract with Nevada County. WBDF has a capacity to hold 283 inmates. The facility houses both female and male inmate population. This population includes inmates from AB-109 State placements, inmates are also housed from other counties and federal government under contract and US Immigration and Customs Enforcement.

Inmate programs consist of English as a Second Language, Alcoholics and Narcotics Anonymous programming. Numerous community-based programs are available including Community Recovery Resources for mental health and recovery, Mothers in Recovery, Family and Life Skills services which include parenting, anger management, Batterer's Intervention, Life Skills and literacy. Facility manages home detention, educational opportunities, work release, vocational classes, substance abuse prevention, education and recovery, and religious and spiritual involvement, as well as the use of suitable Inmate Workers to assist non-profit and government organizations in the communications.

SUMMARY OF AUDIT FINDINGS

On April 25, 2016 through April 27, 2016 a PREA audit tour was conducted at the Wayne Brown Detention Facility, located in Nevada City, California. summary of audit findings are as follows:

INTERIM AUDIT FINDINGS	FINAL AUDIT FINDINGS (AFTER CORRECTIVE ACTION)
Number of standards exceeded: 0	Number of standards exceeded: 0
Number of standards met: 22	Number of standards met: 41
Number of standards not met: 19	Number of standards not met: 0
Number of standards not applicable: 2	Number of standards not applicable: 2

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) POLICY 2-1 PROVIDES WRITTEN POLICY WHICH MANDATES ZERO TOLERANCE FOR INMATE ON INMATE AND STAFF SEXUAL ABUSE AND SEXUAL MISCONDUCT TOWARDS INMATES. POLICY PROVIDES GUIDELINES FOR IMPLEMENTATION OF AGENCY'S APPROACH FOR THE PREVENTION, DETECTION, RESPONSE, INVESTIGATION, PUNISHMENT FOR THE PERPETRATOR, TREATMENT & SUPPORT FOR THE VICTIM AND DATA COLLECTION TO PROTECT THE INMATE POPULATION FROM SEXUAL ABUSE AND SEXUAL MISCONDUCT. POLICY PROVIDE DEFINITIONS OF PROHIBITED BEHAVIORS REGARDING SEXUAL ABUSE, SEXUAL MISCONDUCT, SEXUAL HARASSMENT AND SANCTIONS FOR PARTICIPATION IN PROHIBITED BEHAVIORS TO INCLUDE STRATEGIES & RESPONSES TO REDUCE SEXUAL ABUSE AND SEXUAL HARASSMENT OF INMATES THROUGH CORRECTIVE ACTION REVIEWS AND DATA COLLECTION.
- b) PREA COORDINATOR AT LIEUTENANT LEVEL, 4TH LEVEL DOWN FROM SHERIFF AND IS CONSIDERED UPPER LEVEL AGENCY-WIDE PREA COORDINATOR, PREA COORDINATOR IS IDENTIFIED IN THE ORGANIZATIONAL CHART REPORTING DIRECTLY TO THE CUSTODY CAPTAIN. INTERVIEW WITH PREA COORDINATOR INDICATES DUE TO ADDITIONAL ASSIGNED WORK RESPONSIBILITIES HIS AVAILABILITY TO MANAGE HIS PREA RELATED RESPONSIBILITIES IS LIMITED.
- c) PREA COMPLIANCE MANAGER IS IDENTIFIED IN AGENCY ORGANIZATIONAL CHART AND REPORTS TO THE PREA COORDINATOR.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.11 AS STANDARD PROVISION 115.11(b) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO PROVIDE PREA COORDINATOR WITH SUFFICIENT TIME TO MANAGE HIS PREA RELATED RESPONSIBILITIES AS MANDATED BY STANDARD PROVISION 115.11(b).

CORRECTIVE ACTION COMPLETION 9/26/15:

WRITTEN CORRESPONDENCE FROM PREA COORDINATOR INDICATES THE TRAINING COMPLETION OF SUPERVISORS, INITIATION OF PREA STANDARD REQUIREMENTS AND CREATION OF INVESTIGATIVE TEMPLATES USED TO INVESTIGATE PREA INCIDENTS TO THE SPECIAL INVESTIGATORS HAS PROVIDED THE PREA COORDINATOR TO MANAGE PREA RESPONSIBILITIES. AGENCY PROVIDED AUDITOR WITH THE INVESTIGATIVE FORMS/TEMPLATES USED TO DOCUMENT PREA RELATED INVESTIGATIONS. AGENCY COMPLIES WITH STANDARD 115.11(b).

AGENCY COMPLIES WITH STANDARD PROVISION 115.11(b)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.11.

Standard 115.12 Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- Not Applicable

115.12(a) and 115.12(b) – N/A - AGENCY DOES NOT CONTRACT FOR THE CONFINEMENT OF INMATES.

Standard 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

a) STAFFING PLAN DEVELOPMENT, PREA POLICY DD-69 AND FACILITY STAFFING PLAN POLICY IS BASED ON DESIGN AND ABILITY TO COMPLY WITH PENAL CODE 4021 AND CALIFORNIA CODE OF REGULATIONS TITLE 15 SECTION 1027. POLICY DD 20 WAYNE BROWN FACILITY DIVISION FACILITY STAFFING 1027 MANDATES STAFFING PLAN IS PREDICATED ON SUFFICIENT PERSONNEL TO CONDUCT COUNTS/SAFETY CHECKS OF INMATES THROUGH DIRECT VISUAL SUPERVISION OF ALL INMATES AND ENSURE THE IMPLIMENTATION OF ALL PROGRAMS AND ACTIVITIES REQUIRED BY CCR TITLE 15. THIS ALLOWS FOR MINIMAL STAFFING OF ONE SERGEANT ASSIGNED TO EACH SHIFT DURING NORMAL OPERATIONS & IN ABSENCE OF SERGEANT, THE JAIL TRAINING OFFICER MAY BE APPOINTED AS THE OFFICER IN CHARGE. IN ABSENCE OF JAIL TRAINING OFFICER, THE SHIFT SUPERVISOR MAY DESIGNATE THE CORRECTIONAL OFFICER DEEMED FIT TO BE THE MOST COMPETENT AS THE OFFICER IN CHARGE. DURING EMERGENCIES WHERE A SHORTAGE OF SUPERVISORS MAY EXIST, THE FACILITY COMMANDER OR DESIGNEE WILL BE THE SUPERVISOR. LINE STAFF CONSISTS OF 2 OFFICERS ASSIGNED TO POD A & POD B, ONE OFFICER ASSIGNED TO CENTRAL CONTROL, 2 OFFICERS ASSIGNED TO N SECTION AND ONE OFFICER ASSIGNED TO BOOKING. POLICY DD-69 MANDATES STAFFING PLAN INCLUDE FINDINGS OF INADEQUACY FROM INTERNAL OR EXTERNAL OVERSIGHT BODIES, COMPONENTS OF FACILITY’S PHYSICAL PLANT, COMPOSITION OF THE INMATE POPULATION, INSTITUTIONAL PROGRAMS OCCURRING ON A PARTICULAR SHIFT, PREVALENCE OF SUBSTANTIATED AND UNSUBSTANTIATED INCIDENTS OF SEXUAL ABUSE OR ANY OTHER RELEVANT FACTORS AS DESCRIBED IN THE REQUIRED CRITERIA OUTLINED IN STANDARD PROVISION 115.13(a) THAT IS MANDATED TO BE CONSIDERED WHEN CALCULATING ADEQUATE STAFFING LEVELS TO INCLUDE THE NEED FOR VIDEO MONITORING. REVIEW OF FACILITY STAFFING PLAN 1027 FINDS PLAN TO BE INADEQUATE TO COMPLY WITH STANDARD PROVISION 115.13(a). THE CURRENT STAFFING PLAN DOES NOT DISCUSS ANY FINDINGS FROM OUTSIDE AGENCIES, DESCRIPTIONS OF BLIND SPOTS IN PHYSICAL PLANT, COMPOSITION OF INMATE POPULATION, INSTITUTIONAL PROGRAMS AND IS DEEMED NON COMPLIANT WITH POLICY DD-69 AND STANDARD PROVISION 115.13(a). CORRECTIVE DIVISION DIRECTIVE 20 – FACILITY STAFFING 1027 IS SPECIFIC TO THE WAYNE BROWN CORRECTIONAL FACILITY. INTERVIEWS WITH FACILITY COMMANDER AND PREA COMPLIANCE

MANAGER INDICATE STAFFING PLAN IS REVIEWED ANNUALLY. VIDEO MONITORING HAS BEEN ENHANCED TO ASSIST STAFF SUPERVISION.

- b) 4 STAFFING PLAN DEVIATIONS OVER THE PAST 12 MONTHS. THESE DEVIATIONS WERE DOCUMENTED IN AN INCIDENT REPORT TO THE SHIFT SERGEANT. ALL 4 STAFFING DEVIATIONS WERE DUE TO HOSPITAL TRANSPORT OF INMATES. COMMON REASONS FOR STAFFING PLAN DEVIATIONS IS UNPLANNED STAFF ABSENCE, HOSPITAL SECURITY AND UNSCHEDULED TRANSPORTS. FACILITY COMMANDER INTERVIEW INDICATES DEVIATIONS FROM STAFFING PLAN ARE DOCUMENTED ON AN INCIDENT REPORT WHEN FACILITY FALLS BELOW MINIMAL STAFFING. CORRECTIVE ACTION PLAN IS ALSO INCLUDED.
- c) TITLE 15 1025 & 1027 MANDATE STAFFING PLAN BE REVIEWED AT THE SAME TIME AS THE BIENNIAL INSPECTION. AGENCY IS NON COMPLIANT WITH STANDARD PROVISION 115.13(c), WHICH REQUIRES A STAFFING PLAN REVIEW FOR EACH FACILITY NO LESS THAN ANNUALLY. STAFFING PLAN REVIEW MUST BE DOCUMENTED. PREA COORDINATOR INTERVIEW INDICATES STAFFING PLAN IS REVIEWED ANNUALLY FOR EACH FACILITY TO INCLUDE VIDEO MONITORING, STAFFING, AND RESOURCES AVAILABLE TO COMMIT TO THE STAFFING PLAN. AUDITOR WAS NOT PROVIDED A COMPLIANT STAFFING PLAN FOR EACH FACILITY DURING THE ON-SITE REVIEW. PREA COORDINATOR IS CONSULTED IN THE STAFFING PLAN REVIEWS.
- d) POLICY DD-69 MANDATES UNANNOUNCED ROUNDS THAT COVERS DAY AND NIGHT SHIFTS TO BE CONDUCTED BY INTERMEDIATE OR HIGHER-LEVEL STAFF. ALL ROUNDS ARE TO BE DOCUMENTED IN THE JMS SYSTEM.

POLICY ALSO PROHIBITS STAFF FROM ALERTING OTHER STAFF MEMBERS OF THE CONDUCT OF SUCH ROUNDS UNLESS SUCH ANNOUNCEMENT IS RELATED TO THE LEGITIMATE OPERATIONAL FUNCTIONS OF THE FACILITY. DURING ON-SITE FACILITY REVIEW, AUDITOR OBSERVED INTERMEDIATE STAFF UNANNOUNCED ROUNDS. UPON COMPLETION OF THE ROUNDS, INTERMEDIATE STAFF LOGS THE ROUNDS INTO THE JAIL MANAGEMENT SYSTEM (JMS). REVIEW OF THE JMS SYSTEM LOGS INDICATE UNANNOUNCED ROUNDS ARE DOCUMENTED FOR EACH SHIFT. NEVADA COUNTY JAIL IS ON A 12 HOUR STAFFING SHIFT. INTERVIEW WITH INTERMEDIATE LEVEL STAFF INDICATE THEY CONDUCT THEIR ROUNDS BY INSTRUCTING CENTRAL CONTROL NOT TO INFORM POD CONTROL WHEN THEY ARE CONDUCTING THEIR ROUNDS AS THEY WOULD DURING NORMAL OPERATIONS.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.13 AS STANDARD PROVISIONS 115.13(a) AND 115.13(c) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND CURRENT STAFFING PLAN TO PROVIDE FOR ANY FINDINGS FROM OUTSIDE AGENCIES, DESCRIPTIONS OF BLIND SPOTS IN PHYSICAL PLANT, COMPOSITION OF INMATE POPULATION, INSTITUTIONAL PROGRAMS AND IS DEEMED NON COMPLIANT WITH POLICY DD-69 AND STANDARD PROVISION 115.13(a).
2. AGENCY TO AMEND POLICY TO MANDATE STAFFING PLAN REVIEW FOR EACH FACILITY TO BE CONDUCTED NO LESS THAN ANNUALLY. STAFFING PLAN REVIEW MUST BE DOCUMENTED.
3. STAFFING PLAN FOR EACH FACILITY (WAYNE BROWN AND TRUCKEE SUBSTATION) TO BE PROVIDED TO AUDITOR FOR VERIFICATION.

CORRECTIVE ACTION COMPLETION 9/26/16:

AGENCY AMENDED POLICY DD-20 TO INCLUDE A MANDATE THAT STAFFING PLAN CONSIDER FINDINGS FROM OUTSIDE AGENCIES, DESCRIPTIONS OF BLIND SPOTS IN PHYSICAL PLANT, COMPOSITION OF INMATE POPULATION AND INSTITUTIONAL PROGRAMS. AGENCY COMPLIES WITH STANDARD PROVISION 115.13(a). AGENCY AMENDED POLICY DD-20 TO INCLUDE NARRATIVE TO MANDATE STAFFING PLAN REVIEW WILL BE CONDUCTED NO LESS FREQUENTLY THAN ONCE EACH YEAR. THE REVIEW TEAM SHALL DOCUMENT ITS FINDINGS, INCLUDING JUSTIFICATION FOR ALL DEVIATIONS FROM THE STAFFING PLAN. AGENCY PROVIDED

AUDITOR WITH PREA COMPLIANT STAFFING PLAN SPECIFIC TO WAYNE BROWN DETENTION FACILITY WHICH MEETS MANDATED CRITERIA OUTLINED IN STANDARD PROVISIONS 115.13(a). AGENCY COMPLIES WITH STANDARD PROVISION 115.13(c).

AUDITOR HAS DETERMINED AGENCY COMPLIES WITH STANDARD 115.13

Standard 115.14 Youthful inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- Not Applicable

115.14(a) thru 115.14(c) - N/A - FACILITY DOES NOT HOUSE YOUTHFUL INMATES

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) CORRECTIONS DIVISION DIRECTIVE 2 PROHIBITS CROSS GENDER STRIP OR CROSS GENDER VISUAL BODY CAVITY SEARCHES OF INMATES. STRIP SEARCHES WILL BE CONDUCTED BY STAFF OF THE SAME SEX AS THE INMATE BEING SEARCHED. SHOULD A BODY CAVITY SEARCH NEED TO BE CONDUCTED, A SEARCH WARRANT MUST BE OBTAINED PRIOR TO SEARCH AND ONLY MEDICAL PERSONNEL WITH SECURITY PRESENT WILL CONDUCT THE SEARCH. ALL PERSONS PRESENT DURING THE PHYSICAL BODY CAVITY SEARCH SHALL BE OF THE SAME SEX AS PERSON BEING SEARCHED EXCEPT FOR LICENSED MEDICAL PERSONNEL. AGENCY REPORTS NO INSTANCES OF CROSS GENDER STRIP OR CROSS-GENDER VISUAL BODY CAVITY SEARCHES OF INMATES OVER THE PAST 12 MONTHS.
- b) FACILITY PROHIBITS CROSS-GENDER PAT-DOWN SEARCHES OF FEMALE INMATES ABSENT EXIGENT CIRCUMSTANCES. AGENCY REPORTS NO CROSS GENDER PAT DOWN SEARCHES OVER THE PAST 12 MONTHS. INTERVIEW WITH RANDOM SAMPLE OF 15 INMATES AND 12 STAFF INDICATE CROSS-GENDER PAT-DOWN SEARCHES ARE PROHIBITED AND HAVE NOT OCCURRED OVER PAST 12 MONTHS. THERE ARE ALWAYS FEMALE STAFF AVAILABLE TO CONDUCT SEARCHES OF FEMALES.
- c) POLICYS DD-69, DD-6 AND DD-2 MANDATES FACILITY DOCUMENT ALL CROSS-GENDER PHYSICAL BODY CAVITY SEARCHES AND STRIP SEARCHES FOR PERSONS WHO ARE ARRESTED AND HELD IN CUSTODY ON FRESH FELONY WARRANTS, PAROLE VIOLATIONS, DETAINEES WHO ARE ARRESTED FOR INFRACTIONS OR MISDEMEANOR PRE-ARRAIGNMENT DETAINEES IN THE JMS SYSTEM. STRIP AND VISUAL BODY CAVITY SEARCHES WILL BE CONDUCTED BY AN OFFICER OF THE SAME SEX AS THE INMATE. MANDATED DOCUMENTATION OF ALL CROSS-GENDER PAT-DOWN SEARCHES OF FEMALE INMATES IS NOT INCLUDED IN POLICY.

- d) PREA POLICY 69 MANDATES AGENCY ENABLE INMATES TO CONDUCT BODILY FUNCTIONS, SHOWER, CHANGE CLOTHING WITHOUT NON-MEDICAL STAFF OF THE OPPOSITE GENDER VIEWING BREASTS, BUTTOCKS OR GENITALIA EXCEPT IN EXIGENT CIRCUMSTANCES OR WHEN VIEWING IS INCIDENTAL TO ROUTING CELL CHECKS (INCLUDING VIDEO CAMERA). POLICY ALSO MANDATES STAFF OF THE OPPOSITE GENDER ANNOUNCE THEIR PRESENCE WHEN ENTERING AN INMATE HOUSING UNIT. INTERVIEW WITH RANDOM SAMPLE OF INMATES AND STAFF INDICATE INMATES HAVE THE ABILITY TO SHOWER, TOILET AND PERFORM BODILY FUNCTIONS WITHOUT BEING VIEWED BY STAFF OF THE OPPOSITE SEX. DURING FACILITY REVIEW, AUDITOR OBSERVED OPPORTUNITY FOR CROSS-GENDER VIEWING FROM THE MEDICAL HOUSING CELL CAMERAS, INTAKE HOLDING CELLS CAMERAS AND INTAKE HOLDING CELL WINDOWS (H-1 THRU H-8). SOBERING CELL H-6 NEEDS FROSTING ON WINDOW FOR COMPLIANCE. AUDITOR HAD FEMALE OFFICER ENTER B-SECTION HOUSING UNIT AND OBSERVED SHE FAILED TO ANNOUNCE AS SHE ENTERED THE MALE HOUSING AREA. INTERVIEWS WITH INMATES HOUSED IN PODS A & B INDICATE OFFICERS OF THE OPPOSITE GENDER DO NOT ANNOUNCE WHEN ENTERING THEIR HOUSING AREA. INMATES IN N-SECTION INDICATE OFFICERS ALWAYS ANNOUNCE SHOULD THEIR BE CROSS-GENDER ENTRY INTO THE DORM AREA. INTERVIEW WITH STAFF INDICATE FEMALE STAFF DO NOT ANNOUNCE PRIOR TO OR UPON ENTRY INTO A MALE HOUSING UNIT. MALE STAFF ARE PROHIBITED FROM ENTERING FEMALE HOUSING SECTIONS WITHOUT A FEMALE OFFICER STANDING BY AND ANNOUNCING OR EXIGENT CIRCUMSTANCES.
- e) CORRECTIONS DIVISION DIRECTIVE 2 POLICY PROHIBITS STAFF FROM PHYSICALLY SEARCHING TRANSGENDER OR INTERSEX INMATES FOR THE SOLE PURPOSE OF DETERMINING THEIR GENITAL STATUS. INTERVIEW WITH RANDOM SAMPLE OF 12 STAFF DETERMINES THEIR EDUCATION AND KNOWLEDGE OF PREA MANDATES AND POLICY REGARDING PROHIBITED SEARCHES OF INMATES TO DETERMINE THEIR GENITAL STATUS.
- f) AGENCY PROVIDED CONTENTS OF TRAINING CURRICULA AND EXERPT FROM FIELD TRAINING MANUAL WHICH PROVIDES LESSON PLAN TO TRAIN STAFF HOW TO CONDUCT CROSS-GENDER PAT-DOWN SEARCHES OF TRANSGENDER AND INTERSEX INMATES AS OUTLINED IN THE CALIFORNIA PENAL CODE. INTERVIEW WITH RANDOM SAMPLE OF 12 STAFF INDICATES THEY HAVE RECEIVED TRAINING ON HOW TO CONDUCT CROSS-GENDER PAT-DOWN SEARCHES OF INMATES IN 2015 & 2016.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.15 AS STANDARD PROVISIONS 115.15(c) AND 115.15(d) ARE NON-COMPLIANT.

AUDITOR TO VERIFY COMPLIANCE BY REVIEWING CROSS-GENDER COMPLIANCE AND STAFF ANNOUNCEMENTS DURING A CORRECTIVE ACTION SITE REVIEW TO BE SCHEDULED 90 DAYS PRIOR TO THE CORRECTIVE ACTION DEADLINE.

AGENCY TO PROVIDE VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND POLICY DD-69 AND/OR DD-2 TO MANDATE DOCUMENTATION OF ALL CROSS-GENDER PAT-DOWN SEARCHES OF FEMALE INMATES.
2. AGENCY TO ENSURE THROUGH CAMERA RETASKING, CAMERA FROSTING, WINDOW FROSTING AND CROSS-GENDER ANNOUNCEMENTS, THE FOLLOWING AREAS DO NOT PROVIDE FOR CROSS-GENDER VIEWING EXCEPT IN EXIGENT CIRCUMSTANCES OR WHEN SUCH VIEWING IS INCIDENTAL TO ROUTINE CELL CHECKS:
 - a. MEDICAL HOUSING CELL CAMERAS
 - b. INTAKE HOLDING CELL CAMERAS
 - c. INTAKE HOLDING CELL WINDOWS H-1 THRU H-8
 - d. SOBERING CELL H-6 (FROSTING ON WINDOW)

- e. CROSS-GENDER ANNOUNCEMENT CONDUCTED IN HOUSING SECTIONS ASSIGNED TO PODS A AND B.

CORRECTIVE ACTION COMPLETION 10/11/16:

AGENCY AMENDED PREA POLICY DD-69 WHICH MANDATES DOCUMENTATION OF CROSS-GENDER PAT-DOWN SEARCHES OF FEMALE INMATES. AGENCY COMPLIES WITH STANDARD PROVISION 115.15(c). AUDITOR CONDUCTED ON-SITE FACILITY STATUS REVIEW ON 10/11/16. AGENCY MODIFIED CROSS GENDER VIEWING OPPORTUNITY FOR THE FOLLOWING AREAS:

- a) INTAKE & MEDICAL CELL CAMERAS HAVE BEEN PIXELATED TO PREVENT CROSS-GENDER VIEWING
- b) INTAKE HOLDING CELL WINDOWS HAVE BEEN FROSTED TO PREVENT CROSS-GENDER VIEWING
- c) SOBERING CELLS H-2 AND H-8 WERE NOT FROSTED AS THEY ARE SOBERING CELLS AND DESIGNED FOR HIGH VISIBILITY. THEY HAVE MODESTY WALLS FOR ELIMINATION. AGENCY AMENDED POLICY DD-6 TO MANDATE STAFF OF THE OPPOSITE GENDER SHALL ANNOUNCE THEIR PRESENCE WHEN ENTERING AN INMATES HOUSING UNIT.
- d) AUDITOR OBSERVED DEMONSTRATED COMPLIANCE OF CROSS GENDER ANNOUNCEMENT BY HAVING MALE CONTROL DEPUTY CONDUCT A COUNT IN FEMALE HOUSING UNIT B. MALE INMATES IN DIFFERENT PODS WERE INTERVIEWED AND INDICATED ALL STAFF CONDUCT ANNOUNCEMENTS WHEN ENTERING PODS IN COMPLIANCE WITH STANDARD PROVISION 115.15(d)

AGENCY HAS COMPLIED WITH STANDARD PROVISIONS 115.15(c) & 115.15(d).

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.15

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

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) CORRECTIONS DIVISION DIRECTIVE 31 – MENTALLY DISORDERED INMATES – 1052, CORRECTIONS DIVISION DIRECTIVE 50 – DEVELOPMENTALLY DISABLED INMATES – 1057, PREA POLICY DD-69 MANDATE THE NEVADA COUNTY CORRECTIONS DIVISION TO ADOPT PROCEDURES, WHICH PROVIDE FOR THE IDENTIFICATION, HOUSING, AND EVALUATION OF ALL MENTALLY DISORDERED INMATES AND DEVELOPMENTALLY DISABLED INMATES. PREA POLICY 2-1 MANDATES PREA EDUCATION SHALL BE COMMUNICATED ORALLY, VISUALLY OR IN WRITING ACCESSIBLE TO ALL INMATES INCLUDING THOSE WHO ARE LEP, DEAF, VISUALLY IMPRAIRED OR OTHERWISE DISABLED AS WELL AS TO INMATES WHO HAVE LIMITED READING SKILL. AGENCY HAS NOT PROVIDED WRITTEN MATERIALS OR METHODS USED FOR EFFECTIVE COMMUNICATION AS IT RELATES TO VISUALLY IMPAIRED OR BLIND INMATES. AGENCY PROVIDED INVOICE FOR LANGUAGE LINE SERVICES, WHICH PROVIDES INTERPRETERS FOR LEP, SIGN LANGUAGE AND A NUMBER OF DIFFERENT LANGUAGES. THERE IS NO AGREEMENT FOR SERVICES AS THIS ANNUAL COST USE IS FLUID, THERE FORE THEIR BUDGET PROVIDES A BLANKET ORDER TO PAY FOR SERVICES AS THEY ARE BEING USED. NO DOCUMENTATION PROVIDED OF STAFF TRAINING ON PREA-COMPLIANT PRACTICES FOR INMATES WITH DISABILITIES. INTERVIEW WITH DISABLED INMATES WITH LIMITED READING SKILLS INDICATE STAFF READ ORIENTATION INFORMATION THEM BUT DO NOT READ PREA LITERATURE FORM TO THEM BEFORE THEY SIGN. STAFF DO NOT DETERMINE IF INMATES HAVE LITTLE OR NO READING ABILITIES DURING THE INTAKE AND SCREENING PROCESS.

AUDITOR OBSERVED INTAKE OFFICER READING THE AGENCY'S ZERO TOLERANCE POLICY TO INCOMING INMATE DURING PROCESSING. INTERVIEW WITH AGENCY HEAD INDICATES FACILITY HAS MULTIPLE WAYS OF COMMUNICATING WITH DISABLED, LEP INMATES THROUGH STAFF INTERPRETERS AND LANGUAGE LINE INTERPRETER CONTRACT. AGENCY ALSO USES COMMUNITY-BASED GROUPS TO ASSIST DEVELOPMENTALLY DISABLED AND LIMITED READING SKILLS (FREED), AND CAN CALL THE COUNTY'S 211 FOR REFERRAL HELP 24/7.

- b) AGENCY PROVIDED COPY OF PREA "WHAT YOU NEED TO KNOW PAMPHLET", WHICH IS IN ENGLISH. NO PAMPHLET IN ALTERNATE LANGUAGE PROVIDED. PAMPHLET DOES NOT PROVIDE LIMITS OF CONFIDENTIALITY OR WHETHER OR NOT THE DOMESTIC VIOLENCE AND SEXUAL ASSAULT COALITION HOTLINE IS MONITORED BY THE AGENCY.
- c) AGENCY PROVIDED OPERATIONAL DIRECTIVES FOR MENTALLY DISORDERED AND DEVELOPMENTALLY DISABLED INMATES. BOTH DIRECTIVES ONLY DISCUSS HOUSING AND PLACEMENT OF THESE INMATES. NO MENTION OF EFFECTIVE COMMUNICATION AS IT RELATES TO SEXUAL ABUSE/HARASSMENT IN THOSE DIRECTIVES. INTERVIEW WITH INMATES IDENTIFIED AS LEP INDICATE THERE ARE MANY STAFF WHO SPEAK SPANISH AND CAN INTERPRET EFFECTIVELY. INTERVIEW WITH STAFF INDICATE THEIR KNOWLEDGE AND EDUCATION ON THE USE OF LANGUAGE LINE INTERPRETER CONTRACT SERVICES.
- d) PREA POLICY DD 69 PROHIBITS THE USE OF INMATE INTERPRETERS EXCEPT IN LIMITED CIRCUMSTANCES WHERE A DELAY IN OBTAINING INFORMATION COULD COMPROMISE THE INMATES'S SAFETY, THE PERFORMANCE OF FIRST-RESPONDER DUTIES OR THE INVESTIGATIONS OF THE INMATE'S ALLEGATIONS. THERE HAVE BEEN NO INSTANCES OF INMATE INTERPRETERS BEING USED OVER THE PAST 12 MONTHS. INTERVIEW WITH STAFF DETERMINE THEY ARE WELL EDUCATED ON THE PROHIBITED USE OF INMATE INTERPRETERS DURING 1ST RESPONDER INVESTIGATION OF AN INMATE'S ALLEGATION OF SEXUAL ABUSE.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.16 AS STANDARD PROVISIONS 115.16(a), 115.16(b) AND 115.16(c) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO PROVIDE AUDITOR WITH WRITTEN MATERIALS OR METHODS USED FOR EFFECTIVE COMMUNICATION FOR VISUALLY IMPAIRED AND BLIND INMATES.
2. AGENCY TO PROVIDE STAFF TRAINING ON PREA-COMPLIANT PRACTICES FOR INMATES WITH DISABILITIES WHICH INSTRUCT STAFF HOW TO DETERMINE INMATES' READING ABILITIES DURING THE INTAKE AND SCREENING PROCESS PRIOR TO HAVING THEM SIGN ANY DOCUMENTATION ACKNOWLEDGING RECEIPT AND UNDERSTANDING OF RULES, REGULATIONS AND INMATE RIGHTS RELATED TO PREA EDUCATION.
3. AGENCY TO ENSURE THE "WHAT YOU NEED TO KNOW PAMPHLET" IS PRINTED IN BOTH ENGLISH AND SPANISH AND AVAILABLE FOR STAFF TO PROVIDE INMATES IN BOTH BOOKING AND HOUSING AREAS.
4. AGENCY TO AMEND THE "WHAT YOU NEED TO KNOW PAMPHLET" TO PROVIDE LIMITS OF CONFIDENTIALITY OR WHETHER OR NOT THE DOMESTIC VIOLENCE AND SEXUAL ASSAULT COALITION HOTLINE IS MONITORED BY THE AGENCY.
5. AGENCY TO AMEND OPERATIONAL DIRECTIVES FOR MENTALLY DISORDERED AND DEVELOPMENTALLY DISABLED INMATES TO INCLUDE EFFECTIVE COMMUNICATION AS IT RELATES TO SEXUAL ABUSE/HARASSMENT AS SHOULD BE PROVIDED IN THE "WHAT YOU NEED TO KNOW PAMPHLET:.

CORRECTIVE ACTION COMPLETION 9/26/16:

1. PREA POLICY DD-69 MANDATES INFORMATION PROVIDED DURING INTAKE AND PREA EDUCATION SHALL BE COMMUNICATED ORALLY, VISUALLY OR IN WRITING ACCESSIBLE TO ALL INMATES INCLUDING THOSE WHO ARE LIMITED ENGLISH PROFICIENT, DEAF, VISUALLY IMPAIRED, OR OTHERWISE DISABLED, AS WELL AS TO INMATES WHO HAVE LIMITED READING SKILLS PER STANDARD PROVISION 115.16(a).
2. AGENCY AMENDED PREA POLICY DD-69 TO MANDATE INTAKE STAFF HAVE INMATES READ TELEPHONE PIN LAMINATED POSTING TO DETERMINE INMATE READING AND COMPREHENSION ABILITY PRIOR TO HAVING THEM SIGN ANY DOCUMENTATION PER STANDARD PROVISION 115.16(a).
3. AGENCY PROVIDED AUDITOR WITH INMATE HANDBOOK IN BOTH ENGLISH AND SPANISH PER STANDARD PROVISION 115.16(b).
4. AGENCY AMENDED THE PREA HANDBOOK TO PROVIDE LIMITS OF CONFIDENTIALITY AND MONITORING WITH REGARDS TO REPORTING AND ADVOCACY OUTSIDE AGENCIES PER STANDARD PROVISION 115.16(B).
5. AGENCY AMENDED PREA POLICY DD-69 & DD-50 MANDATING APPROPRIATE PROVISIONS TO ENSURE EFFECTIVE EDUCATION FOR INMATES WITH LOW LITERACY LEVELS AND THOSE WITH DISABILITIES THAT HINDER THEIR ABILITY TO UNDERSTAND THE INFORMATION IN THE MANNER PROVIDED. STAFF CONDUCTING THE INITIAL EDUCATION AND INITIAL ASSESSMENT FOR INMATES SHALL HAVE THEM READ ALOUD THE PIN AND TRUST ACCOUNT ADMONISHMENT TO DETECT VISUAL IMPAIRMENT AND OTHER DISABILITIES PER STANDARD PROVISION 115.16(c).

AGENCY COMPLIES WITH STANDARD PROVISIONS 115.16(a), 115.16(b) AND 115.16(c)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.16

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 PROHIBITS THE HIRING OR PROMOTING ANYONE WHO MAY HAVE CONTACT WITH INMATES OR ENLISTING THE SERVICES OF ANY CONTRACTOR WHO MAY HAVE CONTACT WITH INMATES WHO HAVE ENGAGED IN SEXUAL ABUSE IN A CORRECTIONAL FACILITY, CONVICTED OF ENGAGING OR ATTEMPTING TO ENGAGE IN SEXUAL ACTIVITY IF VICTIM DID NOT CONSENT OR REFUSE, HAS BEEN CIVILLY OR ADMINISTRATIVELY ADJUDICATED TO HAVE ENGAGED IN THE ACTIVITIES(S) DESCRIBED ABOVE. AUDITOR CONDUCTED BACKGROUND REVIEW OF 14 STAFF PERSONNEL FILES, 2 VOLUNTEERS AND 4 CONTRACTORS HIRED IN THE PAST 12 MONTHS AND EARLIER. ALL STAFF HAVE COMPLETED BACKGROUND CHECKS. TO INCLUDE BACKGROUND REACHING OUT TO PREVIOUS EMPLOYERS.
 - b) PREA POLICY DD-69 MANDATES THE CONSIDERATION OF ANY INCIDENTS OF SEXUAL HARASSMENT IN DETERMINING WHETHER TO HIRE OR PROMOTE ANYONE OR ENLIST THE SERVICES OF ANY CONTRACTOR, WHO MAY HAVE CONTACT WITH INMATES. INTERVIEW WITH HR STAFF ADMINISTRATOR INDICATES STAFF ARE CLOSELY SCREENED DURING BACKGROUND CHECKS. REVIEW OF PERSONNEL FILES INDICATE MANAGERS REVIEW FILES ANNUALLY.
 - c) GENERAL ORDER 11 MANDATES THE NEVADA COUNTY SHERIFF'S OFFICE TO CONDUCT A THOROUGH PRE-EMPLOYMENT BACKGROUND INVESTIGATION ON ALL APPLICANTS FOR SWORN, NON-SWORN, PART-TIME, FULL-TIME, VOLUNTEER, AND CONTRACT SERVICE POSITIONS WITHIN THE SHERIFF'S OFFICE. POLICY ALSO MANDATES BACKGROUND INVESTIGATORS CONTACT PREVIOUS EMPLOYERS, PAST AND PRESENT. OVER THE PAST 12 MONTHS 4 PERSONS HAVE BEEN HIRED WHO MAY HAVE CONTACT WITH INMATES. ALL HAVE

- COMPLETED BACKGROUND CHECKS THROUGH CBI/FBI. REVIEW OF PERSONNEL FILES OF STAFF HIRED OVER THE PAST 12 MONTHS REVEALED ALL HAD COMPLETED BACKGROUND CHECKS WITH CBI/FBI CLEARANCES.
- d) GENERAL ORDER 11 MANDATES THE NEVADA COUNTY SHERIFF'S OFFICE TO CONDUCT A THOROUGH PRE-EMPLOYMENT BACKGROUND INVESTIGATION ON ALL APPLICANTS FOR SWORN, NON-SWORN, PART-TIME, FULL-TIME, VOLUNTEER, AND CONTRACT SERVICE POSITIONS WITHIN THE SHERIFF'S OFFICE. OVER THE PAST 12 MONTHS 3 CONTRACTORS HAVE BEEN HIRED WHO MAY HAVE CONTACT WITH INMATES. ALL HAVE COMPLETED BACKGROUND CHECKS VIA CBI/FBI. INTERVIEW WITH HR ADMINISTRATOR INDICATE AGENCY CONDUCTS THEIR OWN BACKGROUND CHECKS ON BOTH CONTRACTORS AND ADMINISTRATORS. REVIEW OF PERSONNEL FILES FOR VOLUNTEERS AND CONTRACTORS CORROBORATES THAT STATEMENT.
 - e) PREA POLICY DD-69 MANDATES CRIMINAL BACKGROUND RECORDS CHECKS BE CONDUCTED EVERY 5 YEARS OF CURRENT EMPLOYEES & CONTRACTORS OR OTHERWISE CAPTURE SUCH INFORMATION FOR CURRENT EMPLOYEES. INTERVIEW WITH HR ADMINISTRATOR INDICATE ALL STAFF HAVE AN AFFIRMATIVE DUTY TO REPORT AND SUBSEQUENT ARREST NOTIFICATION FROM DOJ TO INCLUDE CLETS, DOJ AND FBI CHECKS.
 - f) PREA POLICY DD-69 MANDATES AGENCY TO ASK APPLICANTS AND EMPLOYEES ABOUT PREVIOUS SEXUAL MISCONDUCT IN WRITTEN APPLICATIONS, INTERVIEWS FOR HIRING OR PROMOTIONS OR SELF EVALUATIONS CONDUCTED AS PART OF INTERVIEWS OF CURRENT EMPLOYEES. POLICY ALSO MANDATES THAT AGENCY IMPOSE A CONTINUING AFFIRMATIVE DUTY TO DISCLOSE SUCH MISCONDUCT. INTERVIEW WITH HR ADMINISTRATOR INDICATE ALL STAFF HAVE AN AFFIRMATIVE DUTY TO REPORT AND ARE ASKED QUESTIONS REGARDING PREVIOUS SEXUAL MISCONDUCT IN THEIR APPLICATIONS AS VERIFIED BY AUDITOR REVIEW OF PERSONNEL FILES.
 - g) GENERAL ORDER 11 MANDATES APPLICANTS SHALL BE INSTRUCTED THAT THEY WILL BE IMMEDIATELY DISQUALIFIED FROM CONSIDERATION FOR EMPLOYMENT FOR BEING DECEPTIVE, DECEITFUL, NOT TRUTHFUL, OR UNCOOPERATIVE DURING ANY PORTION OF THE PRE-EMPLOYMENT BACKGROUND INVESTIGATION.
 - h) PREA POLICY DD-69 MANDATES AGENCY TO PROVIDE INFORMATION ON SUBSTANTIATED ALLEGATIONS OF SEXUAL ABUSE/HARASSMENT INVOLVING A FORMER EMPLOYEE UPON RECEIVING A REQUEST FROM AN INSTITUTIONAL EMPLOYER FOR WHOM SUCH EMPLOYEE HAS APPLIED TO WORK. INTERVIEW WITH HR ADMINISTRATOR INDICATES SUBSTANTIATED ALLEGATIONS OF SEXUAL ABUSE/HARASSMENT INFORMATION INVOLVING A FORMER EMPLOYEE IS PROVIDED TO AN INSTITUTIONAL EMPLOYER UPON RECEIPT OF A RELEASE OF INFORMATION SIGNED BY THE FORMER EMPLOYEE.

AUDITOR HAD DETERMINED AGENCY MEETS STANDARD 115.17

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) IN 2015, MINIMUM DAY ROOM WAS DIVIDED TO AFFORD MORE CLASSIFICATION OPTIONS. AUDITOR OBSERVED N-SECTION RENOVATION WHICH ALLOWS FOR EXPANSION OF DAY ROOM AND MULTI-PURPOSE ROOM ACCESS FOR INMATES HOUSED IN THAT SECTION.
 - b) THE SYSTEM WAS UPGRADED IN 2013, FROM 32 ANALOGUE CAMERAS WITH NO RECORDING CAPABILITIES AND GRAPHIC DISPLAY BOARDS FOR SECURITY CONTROLS, TO 132 DIGITAL CAMERAS WITH PROGRAMMABLE LOGIC CONTROLS AND GRAPHIC USER INTERFACE SECURITY CONTROLS. THE VIDEO CAMERAS PROVIDE EXTERNAL AND INTERNAL MONITORING. THE CAMERA PLACEMENT WAS A RESULT OF COLLABORATION OF A SECURITY CONSULTANT (ACSI) AND DETENTION MANAGEMENT STAFF. CAMERAS WERE STRATEGICALLY

LOCATED FOR THE BEST COVERAGE OF COMMON/HIGH-RISK AREAS. ALL DVR'S ARE IN THE JAILS MAIN CENTRAL CONTROL ROOM WITH CAMERA MONITORING CAPABILITIES THERE AS WELL. LIMITED MONITORING CAPABILITIES ARE ALSO AVAILABLE IN THREE OTHER JAIL LOCATIONS WHERE INMATE SUPERVISION OR LINE OF SIGHT IS LIMITED. VIDEO RECORDINGS ARE STORED ANYWHERE FROM 13-23 MONTHS, OR IF REVIEWED (PLAYED BACK), ONE YEAR FROM THAT POINT. CAMERAS IN THE MAIN HALLWAYS ARE NOT RECORDED, AS THEY ARE UNDER CONSTANT VISUAL SUPERVISION OF THE CENTRAL CONTROL OFFICER. THREE CAMERAS ON THE ROOF HAVE SPECIALIZED VIEWING CAPABILITIES. AUDIO RECORDINGS ARE LIMITED TO SPECIFIC BOOKING INTAKE CAMERAS. AUDITOR OBSERVED UPGRADED VIDEO MONITORING SYSTEM WHICH RECORDS UP TO 1 YEAR. RECORDING IS TIME IS INCREASED SHOULD ANYONE REVIEW A SPECIFIC RECORDING.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.18

Standard 115.21 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) AGENCY IS RESPONSIBLE FOR CONDUCTING BOTH ADMINISTRATIVE AND CRIMINAL SEX ABUSE INVESTIGATIONS. AGENCY PROVIDED THEIR UNIFORM EVIDENCE PROTOCOL WHEN CONDUCTING SEXUAL ABUSE INVESTIGATION. POLICY 2-1 MANDATES 1ST RESPONDERS PRESERVE & PROTECT CRIME SCENE UNTIL APPROPRIATE STEPS CAN BE TAKEN TO COLLECT EVIDENCE. THIS INCLUDES SEPARATE VICTIM & ABUSER AND REQUEST VICTIM & ENSURE ABUSER NOT TAKE ANY ACTIONS THAT COULD DESTROY PHYSICAL EVIDENCE, INCLUDING WASHING, BRUSHING TEETH, CHANGING CLOTHES, URINATING, DEFECATING, SMOKING, DRINKING OR EATING. DIVISION DIRECTIVE 15 PROTOCOL PROVIDES FOR THE COLLECTION OF EVIDENCE BY USING A DOJ SEXUAL ASSAULT EVIDENCE KIT FROM THE GATHERING MEDICAL PROFESSIONAL & SUBMITTING IT TO THE DOJ CRIME LAB. THE EVIDENCE PROTOCOL PROVIDED BY AGENCY DISCUSSES EVIDENCE TAGGING AND LOGGING TO INCLUDE IMPOUNDING OF EVIDENCE. INTERVIEW WITH RANDOM SAMPLE OF 12 STAFF INDICATES AGENCY CONDUCTS BOTH ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS.
- b) DIVISION DIRECTIVE #15 AND PREA POLICY DD-69 OUTLINES THE UNIFORM EVIDENCE PROTOCOL USED. THIS PROTOCOL IS NOT DEVELOPMENTALLY APPROPRIATE FOR YOUTH AS AGENCY DOES NOT HOUSE YOUTHFUL INMATES IN THE ADULT FACILITIES. EVIDENCE PROTOCOL WAS DEVELOPED USING FIELD SHERIFF EVIDENCE COLLECTION PROTOCOL COUPLED WITH THE NIC TRAINING PROVIDED FOR INVESTIGATORS CERTIFIED TO CONDUCT INVESTIGATIONS IN A CORRECTIONAL SETTING.
- c) PREA POLICY DD-69 & RAPE & SEXUAL DETECTION AND PREVENTION MANUAL MANDATES IN RESPONSE TO ALLEGATION OF SEXUAL ABUSE A MEDICAL OPINION SHALL BE OBTAINED TO DETERMINE WHETHER THE VICTIM IS TO BE TAKEN FOR A FORENSIC EXAMINATION. IN ADDITION, THE VICTIM SHOULD BE ASKED IF HE/SHE RETAINED ANY EVIDENCE OF THE ASSAULT (E.G., SOILED BEDDING, CLOTHING, ETC.). HOSPITAL MEDICAL STAFF WILL BE RESPONSIBLE TO CONDUCT AN EXAMINATION OF THE VICTIM AND ALLEGED SUSPECT TO DETERMINE THE PRESENCE OR ABSENCE OF PHYSICAL TRAUMA, AND PERFORM FOLLOW-UP TESTING FOR SEXUALLY TRANSMITTED DISEASES AND PREGNANCY TESTING, AS APPROPRIATE. FACILITY DOCUMENTS EFFORTS TO LOCATE SANES OR SAFES AND WHEN NOT AVAILABLE, A QUALIFIED MEDICAL PRACTITIONER PERFORMS FORENSIC MEDICAL EXAMINATIONS. PREA POLICY DD-69 & RAPE & SEXUAL DETECTION AND PREVENTION MANUAL POLICY FOR CFMG MANDATES THAT FORENSIC MEDICAL EXAMINATIONS ARE OFFERED WITHOUT FINANCIAL COST TO THE VICTIM. IN THE PAST 12 MONTHS NO FORENSIC EXAMINATIONS WERE CONDUCTED. INTERVIEW WITH FORENSIC DIRECTOR AT SUTTER MEMORIAL

HOSPITAL IN SACRAMENTO INDICATE THEY HANDLE ALL FORENSIC EXAMINATIONS FOR NEVADA COUNTY JAIL. THEY ARE AVAILABLE 24/7 AND USE THE OUTPATIENT BEAR CLINIC TO CONDUCT THE FORENSIC EXAMINATIONS. ADVOCATES ARE PROVIDED BY THE HOSPITAL IN THE EVENT AN ADOVATE DOES NOT ACCOMPANY THE VICTIM. THEY PROVIDE STD PROPHYLAXIS, PREGNANCY TESTS, EMERGENCY CONTRACEPTION AND PREGNANCY EDUCATION.

- d) PREA POLICY DD-69 MANDATES THAT AT THE TIME THE VICTIM IS SENT TO THE HOSPITAL, THE FACILITY COMMANDER IS REQUIRED TO CONTACT THE RAPE CRISIS CENTER TO REQUEST A VICTIM SEXUAL ASSAULT ADVOCATE BE DISPATCHED TO THE HOSPITAL. THESE EFFORTS ARE DOCUMENTED. RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION DIRECTIVE PAGE #314 FROM THE NEVADA COUNTY JAIL POLICY & PROCEDURE MANUAL INDICATE CFMG STAFF HEALTHCARE CLINICIANS SHALL PROVIDE COORDINATION AND REFERRAL ASSISTANCE AS NECESSARY FOR FORENSIC MEDICAL EXAMINATIONS AND EVIDENCE COLLECTION TO BE PROVIDED THROUGH THE DESIGNATED SEXUAL ABUSE RESPONSE TEAM MEMBER. AGENCY PROVIDED UNSIGNED MOU OR AGREEMENT WITH DOMESTIC VIOLENCE & SEXUAL ASSAULT COALITION (DVSAC) RAPE CRISIS CENTER TO PROVIDE ADVOCACY FOR EMOTIONAL SUPPORT. INTERVIEW WITH PREA COMPLIANCE MANAGER INDICATE AGENCY IS COMMUNICATING WITH DVSAC, WORKING TOWARDS AN AGREEMENT OR MOU LANGUAGE THAT IS ACCEPTABLE TO BOTH PARTIES. AGENCY PROVIDED AUDITOR WITH E-MAIL COMMUNICATIONS TO VERIFY AGENCY IS WORKING TOWARDS SECURITY AN MOU WITH DVSAC. DURING INTERVIEWS WITH INMATES, A DVSAC ADVOCATE WAS AVAILABLE DURING THE INTERVIEWS TO PROVIDE EMOTIONAL SUPPORT SHOULD THE NEED ARISE. INTERVIEW WITH DVSAC ADVOCATE INDICATE THEY PROVIDE EMOTIONAL SUPPORT FOR VICTIMS OF SEXUAL ABUSE FROM THE TIME THEY ARE ALERTED, THROUGH FORENSIC EXAMS, INVESTIGATIVE INTERVIEWS, CRIMINAL PROSECUTION AND AFTERCARE ONCE THE CRIMINAL CASE HAS REACHED IT'S CONCLUSION.
- e) RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION DIRECTIVE PAGE #314 FROM THE NEVADA COUNTY JAIL POLICY & PROCEDURE MANUAL INDICATE CFMG STAFF HEALTHCARE CLINICIANS SHALL PROVIDE COORDINATION AND REFERRAL ASSISTANCE AS NECESSARY FOR FORENSIC MEDICAL EXAMINATIONS AND EVIDENCE COLLECTION TO BE PROVIDED THROUGH THE DESIGNATED SEXUAL ABUSE RESPONSE TEAM MEMBER. PREA POLICY DD-69 MANDATES, AS REQUESTED BY THE VICTIM, THE VICTIM ADVOCATE, QUALIFIED AGENCY STAFF MEMBER, OR QUALIFIED COMMUNITY-BASED ORGANIZATION STAFF MEMBER SHALL ACCOMPANY AND SUPPORT THE VICTIM THROUGH THE FORENSIC MEDICAL EXAMINATION PROCESS AND INVESTIGATORY INTERVIEWS AND SHALL PROVIDE EMOTIONAL SUPPORT, CRISIS INTERVENTION, INFORMATION, AND REFERRALS. INTERVIEW WITH PREA COMPLIANCE MANAGER INDICATES DVSAC ADVOCATES ALWAYS AVAILABLE TO PROVIDE EMOTIONAL SUPPORT. INTERVIEW WITH INMATES WHO REPORTED SEXUAL ABUSE INDICATED THEY HAVE USED DVSAC AND INDICATE THEY ARE MOST HELPFUL WITH PROVIDING EMOTIONAL SUPPORT.
- f) N/A - AGENCY IS RESPONSIBLE FOR BOTH ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS.
- g) N/A – STANDARD PROVISION 115.21(g) IS NOT APPLICABLE TO AGENCY/FACILITY PER DOJ.
- h) N/A - STANDARD PROVISION 115.21(h) IS NOT APPLICABLE TO AGENCY/FACILITY PER DOJ.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.21

Standard 115.22 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY 2-1 MANDATES INVESTIGATIONS INTO ALLEGATIONS OF SEXUAL ABUSE AND SEXUAL HARASSMENT SHALL BE CONDUCTED PROMPTLY, THOROUGHLY, AND OBJECTIVELY FOR ALL ALLEGATIONS, INCLUDING THIRD-PARTY AND ANONYMOUS REPORTS. COUNTY HARASSMENT POLICY MANDATES THE PERSONNEL/HUMAN RESOURCES DIRECTOR SHALL AUTHORIZE THE INVESTIGATION OR CONDUCT THE INVESTIGATION PROMPTLY AND THOROUGHLY OF ANY INCIDENT OF ALLEGED HARASSMENT THAT IS REPORTED. INITIALLY, AGENCY REPORTED 10 ALLEGATIONS OF SEXUAL ABUSE OR SEXUAL HARASSMENT RECEIVED IN THE PAST 12 MONTHS WITH 1 ALLEGATION BEING REFERRED FOR CRIMINAL INVESTIGATIONS. DURING ON-SITE AUDIT, AUDITOR WAS ADVISED THERE WERE 10 ALLEGATION OF SEXUAL ABUSE/HARASSMENT OVER THE PAST 12 MONTHS WHERE 1 ALLEGATION WAS REFERRED FOR CRIMINAL PROSECUTION.
- b) PREA POLICY DD-69 MANDATES AGENCY CONDUCT BOTH CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS. AGENCY DOCUMENTS INVESTIGATIONS IN WRITTEN REPORTS. AGENCY POLICY REGARDING THE REFERRAL OF ALLEGATIONS OF SEXUAL ABUSE OR SEXUAL HARASSMENT FOR CRIMINAL INVESTIGATION IS PUBLISHED ON THE AGENCY WEBSITE FOR PUBLIC ACCESS. INTERVIEW WITH INVESTIGATIVE STAFF INDICATE ALL ALLEGATIONS OF SEXUAL ABUSE ARE PROMPTLY INVESTIGATED. AUDITOR REVIEWED THE 10 SEX ABUSE INVESTIGATIONS THAT OCCURRED OVER THE PAST 12 MONTHS AND DOCUMENTATION CORROBORATES THE INVESTIGATOR'S CLAIM.
- c) N/A - AGENCY CONDUCTS THEIR CRIMINAL INVESTIGATIONS.
- d) N/A – STANDARD PROVISIONS DO NOT APPLY TO AGENCY PER DOJ.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.22

Standard 115.31 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 MANDATES ALL EMPLOYEES SHALL RECEIVE DOCUMENTED PREA TRAINING DURING INITIAL TRAINING, NEW EMPLOYEE ORIENTATION, AND ANNUALLY THEREAFTER WHICH SHALL INCLUDE, BUT WILL NOT BE LIMITED TO THE 10 CRITERIA IDENTIFIED IN STANDARD PROVISION 115.31 AND REVIEW OF PREA POLICY DD-69 AND GENERAL ORDER 12. EMPLOYEES SHALL COMPLETE AN EMPLOYEE PREA ACKNOWLEDGEMENT FORM STATING THAT THE EMPLOYEE UNDERSTANDS THE TRAINING THEY HAVE RECEIVED. AGENCY PROVIDED TRAINING CURRICULUM WHICH COVERS THE ABOVE IDENTIFIED AREAS FOR PREA TRAINING. TRAINING OCCURRED IN APRIL 2015 AND ROSTERS PROVIDED BY AGENCY INDICATED 87 STAFF ATTENDED THE PREA TRAINING AT THAT TIME. INTERVIEW WITH 12 RANDOM STAFF INDICATE ALL HAVE RECEIVED EITHER INITIAL PREA TRAINING WHEN HIRED AND REFRESHER PREA TRAINING IN 2016. AGENCY PROVIDED AUDITOR WITH TRAINING ACKNOWLEDGEMENTS FOR RANDOM SAMPLE OF 15 ASSIGNED STAFF.

- b) PREA POLICY DD-69 AND TRAINING CURRICULUM PROVIDES TRAINING WHICH COVERS BOTH MALE, FEMALE AND LGBTI COMMUNITY INMATES. BOTH TRUCKEE FACILITY AND WAYNE BROWN FACILITY HOUSE MALE AND FEMALE INMATES. STAFF ARE ASSIGNED TO WORK IN HOUSING UNITS THAT HOUSE BOTH MALE AND FEMALE INMATES. TRAINING CURRICULUM IS TAILORED TO THE INMATE POPULATION.
- c) AGENCY CONDUCTS ANNUAL TRAINING & INCLUDES BI-ANNUAL REFESHER TRAINING. FACILITY EMPLOYEES 62 STAFF WHO WERE TRAINED OR RETRAINED IN PREA REQUIREMENTS. REVIEW OF SAMPLE TRAINING RECORDS AND INTERVIEW WITH STAFF VERIFY THAT STAFF RECEIVED THEIR PREA TRAINING EVERY OTHER YEAR AND REFRESHER TRAINING BI-ANNUALLY.
- d) PREA POLICY DD-69 MANDATES ALL EMPLOYEES SHALL RECEIVE DOCUMENTED PREA TRAINING DURING INITIAL TRAINING, NEW EMPLOYEE ORIENTATION, AND ANNUALLY THEREAFTER WHICH SHALL INCLUDE, BUT WILL NOT BE LIMITED TO THE 10 CRITERIA IDENTIFIED IN STANDARD PROVISION 115.31 AND REVIEW OF PREA POLICY DD-69 AND GENERAL ORDER 12. EMPLOYEES SHALL COMPLETE AN EMPLOYEE PREA ACKNOWLEDGEMENT FORM STATING THAT THE EMPLOYEE UNDERSTANDS THE TRAINING THEY HAVE RECEIVED. AGENCY PROVIDED TRAINING CURRICULUM WHICH COVERS THE ABOVE IDENTIFIED AREAS FOR PREA TRAINING. TRAINING OCCURRED IN APRIL 2015 AND ROSTERS PROVIDED BY AGENCY INDICATED 87 STAFF ATTENDED THE PREA TRAINING AT THAT TIME. NO FORM OF TRAINING ACKNOWLEDGEMENT PROVIDED WITH TRAINING ROSTERS WITH PAQ. TRAINING ACKNOWLEDGEMENT FORMS PROVIDED TO AUDITOR DURING ON-SITE AUDIT WHICH VERIFIES COMPLIANCE.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.31

Standard 115.32 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES ALL MEDICAL AND MENTAL HEALTH STAFF, VOLUNTEERS AND CONTRACTORS WHO HAVE CONTACT WITH INMATES SHALL BE NOTIFIED OF THE NEVADA COUNTY CORRECTIONS DIVISION ZERO-TOLERANCE POLICY REGARDING SEXUAL ABUSE AND SEXUAL HARASSMENT AND HOW TO REPORT SUCH INCIDENTS. AGENCY REPORTS 103 VOLUNTEERS OR CONTRACTORS WHO HAVE CONTACT WITH INMATES HAVE BEEN TRAINED IN PREA. 100% OF VOLUNTEERS & CONTRACTORS HAVE BEEN TRAINED IN THEIR PREA RESPONSIBILITIES. INTERVIEW WITH A VOLUNTEER AND CONTRACTOR INDICATE THEY HAVE RECEIVED THEIR PREA TRAINING. REVIEW OF VOLUNTEER AND CONTRACTOR TRAINING RECORDS VERIFIES COMPLIANCE.
- b) PREA POLICY DD-69 MANDATES ALL MEDICAL AND MENTAL HEALTH STAFF, VOLUNTEERS AND CONTRACTORS WHO HAVE CONTACT WITH INMATES SHALL RECEIVE ORIENTATION AND PERIODIC TRAINING CONSISTENT WITH THEIR LEVEL OF INMATE CONTACT RELATING TO THEIR RESPONSIBILITIES UNDER THE NEVADA COUNTY CORRECTIONS DIVISION SEXUAL ABUSE AND SEXUAL HARASSMENT PREVENTION, DETECTION AND RESPONSE POLICIES AND PROCEDURES. AGENCY REPORTS 103 VOLUNTEERS OR CONTRACTORS WHO HAVE CONTACT WITH INMATES HAVE BEEN TRAINED IN PREA AS THE NUMBER OF VOLUNTEERS AND INDIVIDUAL CONTRACTORS, WHO MAY HAVE CONTACT WITH INMATES, CURRENTLY AUTHORIZED TO ENTER THE FACILITY IS 103. INTERVIEW WITH 1 VOLUNTEER AND 1 CONTRACTOR INDICATE THEY ARE PROVIDED A PAMPHLET WHICH OUTLINES AGENCY'S ZERO TOLERANCE POLICY AND THEIR RESPONSIBILITY TOWARDS ALLEGATIONS OF SEXUAL ABUSE.
- c) POLICY DD-69 MANDATES MEDICAL AND MENTAL HEALTH STAFF, CIVILIAN STAFF, VOLUNTEERS AND CONTRACTORS SHALL SIGN A PREA ACKNOWLEDGEMENT FORM STATING THAT THEY UNDERSTOOD THE INFORMATION AND TRAINING THEY HAVE RECEIVED. AGENCY REPORTS 103 VOLUNTEERS OR CONTRACTORS WHO HAVE CONTACT WITH INMATES HAVE BEEN TRAINED IN PREA AS THE NUMBER OF VOLUNTEERS AND

INDIVIDUAL CONTRACTORS, WHO MAY HAVE CONTACT WITH INMATES, CURRENTLY AUTHORIZED TO ENTER THE FACILITY IS 103. AGENCY PROVIDED PREA EDUCATION ACKNOWLEDGEMENT FORMS FOR RANDOM SAMPLE OF VOLUNTEERS AND CONTRACTORS ASSIGNED TO THE FACILITY.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.32

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) DURING INTAKE PROCESS, INMATES RECEIVE ZERO TOLERANCE POLICY AND INFORMATION ON HOW TO REPORT INCIDENTS OR SUSPICIONS OF SEXUAL ABUSE OR HARASSMENT. 4680 INMATES HAVE BEEN ADMITTED DURING THE PAST 12 MONTHS AND 100% HAVE RECEIVED THIS INFORMATION DURING INTAKE PER AGENCY DATA. INTERVIEW WITH INTAKE STAFF AND RANDOM SAMPLE OF 15 INMATES VERIFY ALL INMATES ARE PROVIDED PREA ORIENTATION UPON BOOKING AND FOLLOWUP PREA VIDEO WITHIN 72 HOURS OF INTAKE. REVIEW OF RANDOM SAMPLE OF 27 INMATES SCREENING FILES AND SIGNED ATTESTATION FORMS VERIFIES AGENCY'S COMPLIANCE WITH THIS STANDARD PROVISION.
- b) AGENCY INDICATES 547 INMATES ADMITTED TO THIS FACILITY DURING THE PAST 12 MONTHS WHOSE LENGTH OF STAY IN THE FACILITY WAS FOR 30 DAYS OR MORE. 100% RECEIVED COMPREHENSIVE PREA EDUCATION WITHIN 30 DAYS OF INTAKE. INTERVIEW WITH INTAKE STAFF AND RANDOM SAMPLE OF 15 INMATES INDICATE INMATES ARE PROVIDED PREA EDUCATION WITHIN 30 DAYS OF INTAKE. REVIEW OF RANDOM SAMPLE OF 27 INMATE SCREENING FILES VERIFIES 100% COMPLIANCE WITH THIS STANDARD PROVISION.
- c) PREA POLICY DD-69 MANDATES ALL INMATES SHALL RECEIVE AGENCY'S ZERO TOLERANCE POLICY AND PREA EDUCATION DURING THE INTAKE BOOKING PROCESS. THE INFORMATION SHALL BE COMMUNICATED ORALLY, VISUALLY OR IN WRITING ACCESSIBLE TO ALL INMATES INCLUDING THOSE WHO ARE LIMITED ENGLISH PROFICIENT, DEAF, VISUALLY IMPAIRED, OR OTHERWISE DISABLED, AS WELL AS TO INMATES WHO HAVE LIMITED READING SKILLS. THE INFORMATION SHALL INCLUDE THE DEPARTMENTS ZERO-TOLERANCE STANCE, SELF-PROTECTION METHODS (SITUATION AVOIDANCE), PREVENTION AND INTERVENTION, REPORTING SEXUAL ABUSE, TREATMENT AND COUNSELING, PROTECTION AGAINST RETALIATION AND CONSEQUENCES OF FALSE ALLEGATIONS. POLICY AND PROCEDURE IS THE SAME FOR BOTH FACILITIES AS IT RELATES TO INMATE RIGHTS TO BE FREE FROM BOTH SEXUAL ABUSE/HARASSMENT AND RETALIATION FOR REPORTING SUCH INCIDENTS AND ON AGENCY POLICIES AND PROCEDURES FOR RESPONDING TO SUCH INCIDENTS TO THE EXTENT THAT THE POLICIES AND PROCEDURES OF THE NEW FACILITY DIFFER FROM THOSE OF THE PREVIOUS FACILITY. INTERVIEW WITH RANDOM SAMPLE OF STAFF INDICATE THAT IF AN INMATE IS BOOKED EITHER UNDER THE INFLUENCE OR MUST BE TRANSPORTED AND KEPT AT A LOCAL HOSPITAL UNTIL CLEARED FOR INTAKE, THERE MAY BE A DELAY IN PROVIDING FULL PREA EDUCATION. ONCE BOOKING IS CONDUCTED, HOWEVER, INTAKE STAFF READ THE ZERO TOLERANCE POLICY AND INMATE RIGHTS TO THEM AS OBSERVED BY AUDITOR DURING FACILITY REVIEW.
- d) PREA POLICY DD-69 MANDATES THE INFORMATION SHALL BE COMMUNICATED ORALLY, VISUALLY OR IN WRITING ACCESSIBLE TO ALL INMATES INCLUDING THOSE WHO ARE LIMITED ENGLISH PROFICIENT, DEAF, VISUALLY IMPAIRED, OR OTHERWISE DISABLED, AS WELL AS TO INMATES WHO HAVE LIMITED READING SKILLS. APPROPRIATE PROVISIONS SHALL BE MADE TO ENSURE EFFECTIVE EDUCATION FOR THOSE INMATES WITH LOW LITERACY LEVELS AND THOSE WITH DISABILITIES THAT HINDER THEIR ABILITY TO UNDERSTAND

THE INFORMATION IN THE MANNER PROVIDED. INTAKE STAFF READ THE ZERO TOLERANCE POLICY AND INMATE RIGHTS TO INMATES AS OBSERVED BY AUDITOR DURING FACILITY REVIEW. THEY ARE PROVIDED PREA VIDEO AFTERWARDS. LANGUAGE LINE CONTRACTED INTERPRETERS ARE AVAILABLE FOR LIMITED ENGLISH PROFICIENT AND INMATES WHO REQUIRE SIGN LANGUAGE.

- e) PREA POLICY DD-69 MANDATES STAFF WILL DOCUMENT VERIFICATION OF THE OFFENDER ORIENTATION AND EDUCATION ON PREA BY COMPLETING THE OFFENDER PREA ACKNOWLEDGEMENT FORM AND PLACING THE ORIGINAL SIGNED ACKNOWLEDGEMENT FORM IN THE INMATE'S HARD CARD. INMATES ARE REQUIRED TO SIGN THE PREA EDUCATION ATTESTATION FORM WHICH IS MAINTAINED IN THEIR SCREENING FILES. AUDITOR REVIEW OF 27 RANDOM INMATE SCREENING FILES INDICATED THAT 100% HAD THE SIGNED ATTESTATION FORMS.
- f) PREA POLICY DD-69 MANDATES KEY INFORMATION WILL BE CONTINUOUSLY AND READILY AVAILABLE OR VISIBLE TO INMATES THROUGH POSTERS, INMATE HANDBOOKS OR OTHER WRITTEN FORMATS. POSTERS WILL BE DISPLAYED IN APPROPRIATE LOCATIONS WHICH ARE DESIGNED TO INFORM INMATES THAT THE NEVADA COUNTY CORRECTIONS DIVISION HAS A ZERO-TOLERANCE POLICY TOWARDS SEXUAL ASSAULT AND SEXUAL MISCONDUCT AND THAT ALL INMATES ARE ENCOURAGED TO REPORT ANY AND ALL INSTANCES OF SEXUAL ASSAULT SEXUAL MISCONDUCT AND SEXUAL HARASSMENT. PREA POSTERS ARE PROVIDED IN EACH HOUSING SECTION AND NEXT TO THE INMATE PHONES. INMATES ARE PROVIDED AN INMATE HANDBOOK WITH PREA SECTION DURING INTAKE AND BOOKING. AUDITOR OBSERVED NO PREA SIGNAGE OR POSTERS READILY AVAILABLE IN HOLDING CELLS, IN A-B HOUSING UNIT HALLWAYS, MULTI-PURPOSE ROOMS, KITCHEN AND LAUNDRY ROOMS, LACK OF PREA SIGNAGE NEXT TO PHONES IN N-SECTION DORMS.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.33 AS STANDARD PROVISION 115.33(f) IS NON-COMPLIANT.

AUDITOR TO VERIFY COMPLIANCE BY REVIEWING PREA SIGNAGE COMPLIANCE AND STAFF ANNOUNCEMENTS DURING A CORRECTIVE ACTION SITE REVIEW TO BE SCHEDULED 90 DAYS PRIOR TO THE CORRECTIVE ACTION DEADLINE.

AGENCY TO PROVIDE VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

- 1. AGENCY TO PROVIDE PREA SIGNAGE, POSTERS OR STENCILED PREA INFORMATION IN THE FOLLOWING AREAS FOR EFFECTIVE COMMUNICATION. INCLUDE LIMITS OF CONFIDENTIALITY AND MONITORING INFORMATION:
 - a. ALL HOLDING CELLS
 - b. ALL HOUSING POD HALLWAYS
 - c. MULTI-PURPOSE ROOMS
 - d. KITCHEN
 - e. LAUNDRY ROOM
 - f. NEXT TO PHONES IN N-SECTION DORMS

CORRECTIVE ACTION COMPLETION 10/11/16:

AUDITOR CONDUCTED CORRECTIVE ACTION ON-SITE STATUS REVIEW ON 10/11/16 AND OBSERVED THE FOLLOWING PHYSICAL PLANT UPDATES:

- a) PREA SIGNAGE OBSERVED IN ALL HOLDING CELLS IN THE BOOKING AREA EXCEPT SUICIDE CELLS DUE TO SAFETY CONCERNS
- b) PREA SIGNAGE OBSERVED IN ALL HOUSING POD HALLWAYS NEXT TO ENTRY DOORS
- c) PREA SIGNAGE IN MULTI-PURPOSE ROOMS IN HOUSING UNITS TO INCLUDE SIGNAGE FOR VOLUNTEERS AND CONTRACTORS
- d) PREA SIGNAGE OBSERVED IN BREAK ROOM FOR INMATES IN THE KITCHEN

- e) PREA SIGNAGE OBSERVED IN THE LAUNDRY ROOM
- f) PREA SIGNAGE OBSERVED NEXT TO PHONES IN ALL HOUSING UNITS AND HOUSING PODS.

ALL PREA SIGNAGE PROVIDES FOR LIMITS OF CONFIDENTIALITY, MANDATORY REPORTING INFORMATION AND NARRATIVE TO STATE CALLS TO OUTSIDE SOURCES ARE NOT MONITORED BY AGENCY.

AGENCY COMPLIES WITH STANDARD PROVISION 115.33(f)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.33

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
-
- a) PREA POLICY DD-69 MANDATES IN ADDITION TO GENERAL TRAINING PROVIDED TO ALL EMPLOYEES PURSUANT TO (§115.31), NEVADA COUNTY CORRECTIONS DIVISION SHALL ENSURE THAT, TO THE EXTENT THAT NEVADA COUNTY CORRECTIONS DIVISION CONDUCTS SEXUAL ABUSE INVESTIGATIONS, INVESTIGATORS WILL RECEIVE TRAINING IN CONDUCTING INVESTIGATIONS IN A CONFINEMENT SETTING. TRAINING IS OBTAINED THROUGH NICIC ONLINE TRAINING. INTERVIEW WITH INVESTIGATIVE STAFF AND REVIEW OF TRAINING RECORDS VERIFY ALL 14 INVESTIGATORS HAVE COMPLETED SEXUAL ABUSE IN A CONFINEMENT SETTING THROUGH NIC TRAINING.
 - b) PREA POLICY DD-69 MANDATES SPECIALIZED TRAINING SHALL INCLUDE TECHNIQUES FOR INTERVIEWING SEXUAL ABUSE VICTIMS, PROPER USE OF MIRANDA AND GARRITY WARNINGS, SEXUAL ABUSE EVIDENCE COLLECTION IN CONFINEMENT SETTINGS, AND THE CRITERIA AND EVIDENCE REQUIRED TO SUBSTANTIATE A CASE FOR ADMINISTRATIVE ACTION OR PROSECUTION REFERRAL. TRAINING IS OBTAINED THROUGH NICIC ONLINE TRAINING. INTERVIEW WITH INVESTIGATIVE STAFF VERIFIES THEIR KNOWLEDGE AND EDUCATION REGARDING MIRANDA, GARRITY, AND LYBARGER TOPICS LEARNED DURING SEXUAL ABUSE IN A CONFINEMENT SETTING THROUGH NIC TRAINING.
 - c) PREA POLICY 2-1 MANDATES THE NEVADA COUNTY CORRECTIONS DIVISION SHALL MAINTAIN DOCUMENTATION THAT INVESTIGATORS HAVE COMPLETED THE REQUIRED SPECIALIZED TRAINING IN CONDUCTING SEXUAL ABUSE INVESTIGATIONS. COPIES OF THE NICIC TRAINING VERIFICATION DOCUMENTATION FOR ALL 14 INVESTIGATORS EMPLOYED THAT ARE TRAINED TO CONDUCT SEX ABUSE INVESTIGATIONS WERE PROVIDED TO AUDITOR WHICH VERIFIES COMPLIANCE WITH THIS STANDARD PROVISION.
 - d) N/A – NOT APPLICABLE TO THIS AGENCY PER DOJ.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.34

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 AND NEVADA COUNTY JAIL PROCEDURES MANUAL RAPE & SEXUAL ASSAULT DETECTION & PREVENTION (R&SDAP) MANDATES ALL MEDICAL AND MENTAL HEALTH STAFF, WHO HAVE CONTACT WITH INMATES SHALL BE NOTIFIED OF THE NEVADA COUNTY CORRECTIONS DIVISION ZERO-TOLERANCE POLICY REGARDING SEXUAL ABUSE AND SEXUAL HARASSMENT AND HOW TO REPORT SUCH INCIDENTS. MEDICAL AND MENTAL HEALTH STAFF RECEIVE ORIENTATION AND PERIODIC TRAINING CONSISTENT WITH THEIR LEVEL OF INMATE CONTACT RELATING TO THEIR RESPONSIBILITIES UNDER THE NEVADA COUNTY CORRECTIONS DIVISION SEXUAL ABUSE AND SEXUAL HARASSMENT PREVENTION, DETECTION AND RESPONSE POLICIES AND PROCEDURES. POLICY INCLUDES TRAINING REGARDING THE PRESERVATION OF EVIDENCE OF SEXUAL ABUSE. FACILITY DOES NOT EMPLOY MEDICAL OR MENTAL HEALTH STAFF AT THIS FACILITY. AGENCY INDICATES 15 MEDICAL AND MENTAL HEALTH CARE PRACTITIONERS WORK REGULARLY AT THIS FACILITY AND 100% HAVE BEEN TRAINED PER AGENCY POLICY. AUDITOR INTERVIEWED BOTH MEDICAL AND MENTAL HEALTH CONTRACTORS WHO INDICATED THEY RECEIVED PREA TRAINING BY WAY OF THE PREA PAMPHLET PROVIDED THEM AND INITIAL ORIENTATION REGARDING AGENCY'S ZERO TOLERANCE POLICY. MEDICAL AND MENTAL HEALTH PRACTITIONERS OBTAIN ADDITIONAL TRAINING THROUGH THEIR PRACTICE. AGENCY PROVIDED AUDITOR WITH 13 PREA ACKNOWLEDGEMENT FORMS SIGNED BY MEDICAL AND MENTAL HEALTH STAFF CURRENTLY EMPLOYED AT WAYNE BROWN DETENTION FACILITY.
- b) PREA POLICY DD-69 MANDATES MEDICAL AND MENTAL HEALTH STAFF SHALL SIGN A PREA ACKNOWLEDGEMENT FORM STATING THAT THEY UNDERSTOOD THE INFORMATION AND TRAINING THEY HAVE RECEIVED. AGENCY EMPLOYS 15 MEDICAL AND MENTAL HEALTH CARE PRACTITIONERS. TRUCKEE SUBSTATION DOES NOT EMPLOY MEDICAL OR MENTAL HEALTH STAFF AT THIS FACILITY. MEDICAL AND MENTAL HEALTH PRACTITIONERS OBTAIN ADDITIONAL TRAINING THROUGH THEIR PRACTICE. AGENCY PROVIDED AUDITOR WITH 13 PREA ACKNOWLEDGEMENT FORMS SIGNED BY MEDICAL AND MENTAL HEALTH STAFF CURRENTLY EMPLOYED AT WAYNE BROWN DETENTION FACILITY.
- c) N/A – AGENCY MEDICAL STAFF DOES NOT CONDUCT FORENSIC EXAMS.
- d) PREA POLICY DD-69 MANDATES ALL MEDICAL AND MENTAL HEALTH STAFF, WHO HAVE CONTACT WITH INMATES SHALL BE NOTIFIED OF THE NEVADA COUNTY CORRECTIONS DIVISION ZERO-TOLERANCE POLICY REGARDING SEXUAL ABUSE AND SEXUAL HARASSMENT AND HOW TO REPORT SUCH INCIDENTS. MEDICAL AND MENTAL HEALTH STAFF RECEIVE ORIENTATION AND PERIODIC TRAINING CONSISTENT WITH THEIR LEVEL OF INMATE CONTACT RELATING TO THEIR RESPONSIBILITIES UNDER THE NEVADA COUNTY CORRECTIONS DIVISION SEXUAL ABUSE AND SEXUAL HARASSMENT PREVENTION, DETECTION AND RESPONSE POLICIES AND PROCEDURES. REVIEW OF PREA TRAINING ACKNOWLEDGEMENTS VERIFY COMPLIANCE WITH THIS STANDARD PROVISION.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.35

Standard 115.41 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 MANDATES ALL INMATES SHALL BE SCREENED DURING THE BOOKING INTAKE PROCESS TO ASSESS THEIR RISK OF BEING SEXUALLY ABUSED BY OTHER INMATES OR SEXUALLY ABUSIVE TOWARDS OTHER INMATES. IF THE INMATE DISCLOSES PRIOR SEXUAL VICTIMIZATION, WHETHER IT OCCURRED IN AN INSTITUTIONAL SETTING OR IN THE COMMUNITY, STAFF SHALL NOTIFY MEDICAL STAFF IMMEDIATELY. POLICY DOES NOT MENTION RE-SCREENING OF INMATES UPON TRANSFER TO ANOTHER FACILITY. INTERVIEW WITH RISK SCREENING STAFF AND RANDOM SAMPLE OF 15 INMATES INDICATE INMATES ARE PROVIDED SCREENING WITHIN 72 HOURS OF INTAKE AND RESCREENING WITHIN 30 DAYS OF INTAKE.
- b) PREA POLICY DD-69 MANDATES INTAKE SCREENING SHALL TAKE PLACE WITHIN 72 HOURS AFTER ARRIVAL AT THE FACILITY. AGENCY REPORTS 2067 INMATES WERE BOOKED INTO THE FACILITY OVER THE PAST 12 MONTHS WHERE THEIR LENGTH OF STAY WAS FOR 72 HOURS OR MORE. AGENCY CLAIMS 100% OF INMATES WERE SCREENED WITHN 72 HOURS OF ARRIVAL AT FACILITY. INTERVIEW WITH RISK SCREENING STAFF AND RANDOM SAMPLE OF 15 INMATES INDICATE INMATES ARE PROVIDED SCREENING WITHIN 72 HOURS OF INTAKE AND RESCREENING WITHIN 30 DAYS OF INTAKE. REVIEW OF 15 INMATE SCREENING RECORDS, WHICH IS MAINTAINED IN THE ELECTRONIC JAIL MANAGEMENT SYSTEM (JMS). VERIFIES AGENCY'S COMPLIANCE WITH THIS STANDARD PROVISION.
- c) PREA POLICY DD-69 MANDATES SCREENING ASSESSMENTS SHALL BE CONDUCTED USING "RISK ASSESSMENT QUESTIONNAIRE". RISK ASSESSMENT QUESTIONNAIRE WAS PROVIDED TO AUDITOR. REVIEW OF INSTRUMENT INDICATES IT IS WEIGHTED AND SCORE BASED UPON RESPONSES TO SPECIFIC QUESTIONS REQUIRED IN THE STANDADARD PROVISION 115.41(d) CRITERIA.
- d) PREA POLICY DD-69 MANDATES SCREENING ASSESSMENTS SHALL BE CONDUCTED USING "RISK ASSESSMENT QUESTIONNAIRE". RISK ASSESSMENT QUESTIONNAIRE WAS PROVIDED TO AUDITOR. THE PREA RISK ASSESSMENT INSTRUMENT CONTAINS ALL 10 CRITERIA AS IDENTIFIED IN STANDARD PROVISION 115.41(d). AUDITOR OBSERVED INTAKE STAFF CONDUCT SCREENING OF INMATE DURING INTAKE USING THE OBJECTIVE SCREENING INSTRUMENT DURING THE BOOKING PROCEDURE.
- e) HISTORY OF PRIOR INSTITUTIONAL VIOLENCE OR SEXUAL ABUSE, PRIOR ACTS OF SEXUAL ABUSE AND ANY PRIOR CONVICTIONS FOR SEX OFFENSES AGAINST ADULT OR CHILD IS INCLUDED CRITERIA IN THE PREA ASSESSMENT INSTRUMENT. THE OBJECTIVE SCREENING INSTRUMENT QUESTIONS ARE ASKED AT THE BOOKING DESK WHICH IS IN AN OPEN AREA WHERE OTHER INMATES CAN LISTEN IN ON THE RESPONSES.
- f) PREA POLICY DD-69 MANDATES WITHIN 30 DAYS FROM THE INMATE'S ARRIVAL, CLASSIFICATION WILL REASSESS THE INMATE'S RISK OF VICTIMIZATION OR ABUSIVENESS BASED UPON ANY ADDITIONAL RELEVANT INFORMATION RECEIVED SINCE THE INITIAL INTAKE SCREENING. IN THE PAST 12 MONTHS, 547 INMATES WERE REASSESSED FOR RISK OF SEXUAL VICTIMIZATION WITHIN 30 DAYS AFTER ARRIVAL AT THE FACILITY. DURING ON-SITE REVIEW, AUDITOR REVIEWED 15 RANDOM SAMPLE SCREENING FILES WHICH IS MAINTAINED IN THE ELECTRONIC JAIL MANAGEMENT SYSTEM (JMS), AND DETERMINED ALL FILES CONTAINED RE-SCREENING OCCURRING WITHIN THE 30 DAY PERIOD FROM INTAKE, VERIFYING COMPLIANCE WITH THIS STANDARD PROVISION.
- g) PREA POLICY DD-69 MANDATES AN INMATE'S RISK LEVEL SHALL BE REASSESSED WHEN WARRANTED DUE TO REFERRAL, REQUEST, INCIDENT OF SEXUAL ABUSE, OR RECEIPT OF ADDITIONAL INFORMATION THAT BEARS ON THE INMATES RISK OF SEXUAL VICTIMIZATION OR ABUSIVENESS. AGENCY REASSESSES EACH INMATE WITHIN 30 DAYS OF INTAKE REGARDLESS IF ANY ADDITIONAL INFORMATION HAS BEEN RECEIVED OR NOT.

- h) PREA POLICY DD-69 MANDATES INMATES MAY NOT BE DISCIPLINED FOR REFUSING TO ANSWER, OR FOR NOT DISCLOSING COMPLETE INFORMATION IN RESPONSE TO QUESTIONS ASKED PURSUANT TO THEIR MENTAL, PHYSICAL OR DEVELOPMENTAL DISABILITY, INMATES GENDER OR HOW THEIR GENDER IS PERCEIVED TO BE, PREVIOUS SEXUAL VICTIMIZATION EXPERIENCE, OR THEIR OWN PERCEPTION OF VULNERABILITY. INTERVIEW WITH RISK SCREENING STAFF INDICATE INMATES ARE NOT DISCIPLINED SHOULD THEY REFUSE TO RESPOND IN RESPONSE TO THE OBJECTIVE SCREENING INSTRUMENT QUESTIONS.
- i) PREA POLICY DD-69 MANDATES ALL INFORMATION RECEIVED IN RESPONSE TO THE INMATES RISK ASSESSMENT QUESTIONNAIRE IS TO BE TREATED AS CONFIDENTIAL INFORMATION AND SHALL ONLY BE REPORTED TO DESIGNATED SUPERVISORS, CLASSIFICATION STAFF, AND MEDICAL/MENTAL HEALTH STAFF. INTERVIEWS WITH THE PREA COORDINATOR, PREA COMPLIANCE MANAGER & RISK SCREENING STAFF INDICATE RESPONSE QUESTIONS FROM THE OBJECTIVE SCREENING INSTRUMENT ARE MAINTAIN IN THE JAIL MANAGEMENT SYSTEM (JMS). ALL CUSTODY STAFF HAVE ACCESS TO THIS SYSTEM AND SCREENING RECORDS AS ALL STAFF CONDUCT RISK SCREENINGS AND MANAGE MOVEMENT OF INMATES WITHIN THE FACILITY. THE OBJECTIVE SCREENING INSTRUMENT QUESTIONS ARE ASKED AT THE BOOKING DESK WHICH IS IN AN OPEN AREA WHERE OTHER INMATES CAN LISTEN IN ON THE RESPONSES, WHICH COMPROMISES CONFIDENTIALITY AND INMATE SAFETY.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.41 AS STANDARD PROVISIONS 115.41(a) AND 115.41(i) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND PREA POLICY DD-69 TO MANDATE THE RE-SCREENING OF INMATES UPON TRANSFER TO ANOTHER FACILITY (THIS INCLUDE TRANSFER FROM TRUCKEE SUB-STATION TO WBDF).
2. AGENCY TO PROVIDE METHOD FOR INMATES TO RESPOND TO THE PREA OBJECTIVE SCREENING INSTRUMENT QUESTIONS IN A CONFIDENTIAL SETTING.

CORRECTIVE ACTION COMPLETION 10/11/16:

1. AGENCY AMENDED PREA POLICY DD-69 TO MANDATE RE-SCREENING OF INMATES UPON TRANSFER FROM TRUCKEE SUBSTATION LOCKUP FACILITY TO THE WAYNE BROWN FACILITY.
2. DURING CORRECTIVE ACTION ON-SITE FACILITY STATUS REVIEW CONDUCTED BY AUDITOR ON 10/11/16, AUDITOR OBSERVED AREA ON INTERVIEW DESK CONSTRUCTED BY FACILITY WHERE INMATES CAN RESPOND TO THE OBJECTIVE SCREENING INSTRUMENT IN A SETTING DIMINISHES THE OPPORTUNITY FOR OTHER INMATES TO LISTEN TO THE PREA QUESTION RESPONSES.

AGENCY COMPLIES WITH STANDARD PROVISION 115.41(a) & 115.41(i)

AUDITOR DETERMINES AGENCY MEETS STANDARD 115.41

Standard 115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) CORRECTIONS DIVISION DIRECTIVE 36 – INMATE CLASSIFICATION PLAN – 1050 MANDATES CLASSIFICATION SHALL USE THE INFORMATION RECEIVED FROM THE RISK ASSESSMENT QUESTIONNAIRE REQUIRED BY PREA STANDARD §115.41 TO MAKE HOUSING, BED, WORK, EDUCATION AND PROGRAM ASSIGNMENTS WITH THE GOAL OF KEEPING SEPARATE THOSE INMATES AT HIGH RISK OF BEING SEXUALLY VICTIMIZED FROM THOSE AT HIGH RISK OF BEING SEXUALLY ABUSIVE.
1. THE SAFETY OF EACH INMATE SHALL BE INDIVIDUALIZED DETERMINATIONS.
 2. HOUSING AND PROGRAMMING ASSIGNMENTS FOR TRANSGENDER OR INTERSEX INMATES SHALL BE ON A CASE-BY-CASE BASIS.
 3. TRANSGENDER AND INTERSEX INMATES SHALL BE GIVEN THE OPPORTUNITY TO SHOWER SEPARATELY FROM OTHER INMATES.
 4. LESBIAN, GAY, BISEXUAL, TRANSGENDER, OR INTERSEX INMATES SHALL NOT BE PLACED IN DEDICATED HOUSING UNITS SOLELY ON THE BASIS OF SUCH IDENTIFICATION OR STATUS.
- INTERVIEWS WITH PREA COMPLIANCE MANAGER AND RISK SCREENING STAFF VERIFY RISK SCREENING IS USED FOR HOUSING AND PROGRAM ASSIGNMENTS TO PROVIDE SEXUAL SAFETY FOR ALL INMATE HOUSED IN THE FACILITY.
- b) CORRECTIONS DIVISION DIRECTIVE 36 – INMATE CLASSIFICATION PLAN – 1050 MANDATES THE SAFETY OF EACH INMATE SHALL BE INDIVIDUALIZED DETERMINATIONS. INTERVIEWS WITH RISK SCREENING STAFF INDICATE THEY MAKE INDIVIDUALIZED DETERMINATIONS DURING SCREENING TO ENSURE SAFETY OF EACH INMATE. AUDITOR REVIEWED SCREENING RECORDS AND OBSERVED DETERMINATIONS MADE FOR EACH INMATE SCREENED.
- c) CORRECTIONS DIVISION DIRECTIVE 36 – INMATE CLASSIFICATION PLAN – 1050 MANDATES CLASSIFICATION SHALL USE THE INFORMATION RECEIVED FROM THE RISK ASSESSMENT QUESTIONNAIRE REQUIRED BY PREA STANDARD §115.41 TO MAKE HOUSING, BED, WORK, EDUCATION AND PROGRAM ASSIGNMENTS WITH THE GOAL OF KEEPING SEPARATE THOSE INMATES AT HIGH RISK OF BEING SEXUALLY VICTIMIZED FROM THOSE AT HIGH RISK OF BEING SEXUALLY ABUSIVE.
1. THE SAFETY OF EACH INMATE SHALL BE INDIVIDUALIZED DETERMINATIONS.
 2. HOUSING AND PROGRAMMING ASSIGNMENTS FOR TRANSGENDER OR INTERSEX INMATES SHALL BE ON A CASE-BY-CASE BASIS.
 3. TRANSGENDER AND INTERSEX INMATES SHALL BE GIVEN THE OPPORTUNITY TO SHOWER SEPARATELY FROM OTHER INMATES.
 4. LESBIAN, GAY, BISEXUAL, TRANSGENDER, OR INTERSEX INMATES SHALL NOT BE PLACED IN DEDICATED HOUSING UNITS SOLELY ON THE BASIS OF SUCH IDENTIFICATION OR STATUS.
- INTERVIEWS WITH RISK SCREENING STAFF AND PREA COMPLIANCE MANAGER INDICATE THEY FOLLOW POLICY TO MAKE INDIVIDUALIZED DETERMINATIONS DURING SCREENING TO ENSURE SAFETY OF TRANSGENDER AND INTERSEX INMATES. NO TRANSGENDER OR INTERSEX INMATES HOUSED AT WAYNE BROWN FACILITY DURING ON SITE AUDIT.
- d) CORRECTIONS DIVISION DIRECTIVE 36 – INMATE CLASSIFICATION PLAN – 1050 MANDATES PLACEMENT AND PROGRAMMING ASSIGNMENTS FOR TRANSGENDER AND INTERSEX INMATES SHALL BE REASSESSED AT LEAST TWICE A YEAR TO REVIEW ANY THREATS TO SAFETY EXPERIENCED BY THE INMATE. TRANSGENDER AND INTERSEX INMATES OWN VIEWS WITH RESPECT TO HIS OR HER OWN SAFETY SHALL BE GIVEN SERIOUS CONSIDERATION. INTERVIEWS WITH PREA COMPLIANCE MANAGER INDICATE TRANSGENDER AND INTERSEX ARE REASSESSED AT LEAST TWICE A YEAR PER POLICY.

- e) CORRECTIONS DIVISION DIRECTIVE 36 – INMATE CLASSIFICATION PLAN – 1050 MANDATES TRANSGENDER AND INTERSEX INMATES OWN VIEWS WITH RESPECT TO HIS OR HER OWN SAFETY SHALL BE GIVEN SERIOUS CONSIDERATION. INTERVIEWS WITH PREA COMPLIANCE MANAGER AND RISK SCREENING STAFF INDICATE TRANSGENDER AND INTERSEX INMATES OWN VIEWS WITH RESPECT TO THEIR SAFETY IS GIVEN SERIOUS CONSIDERATION AND MAY BE GRANTED AS LONG AS THEIR VIEWS DO NOT COMPROMISE THE SAFETY OF THE INSTITUTION/FACILITY AND SAFETY OF THE INMATE.
- f) CORRECTIONS DIVISION DIRECTIVE 36 – INMATE CLASSIFICATION PLAN – 1050 MANDATES TRANSGENDER AND INTERSEX INMATES SHALL BE GIVEN THE OPPORTUNITY TO SHOWER SEPARATELY FROM OTHER INMATES. INTERVIEWS WITH PREA COMPLIANCE MANAGER AND RISK SCREENING STAFF INDICATE TRANSGENDER AND INTERSEX INMATES ARE PROVIDED THE OPPORTUNITY TO SHOWER SEPARATELY FROM OTHER INMATES. OBSERVATION BY AUDITOR OF PHYSICAL PLANT VERIFIES ALL SHOWERS IN THE FACILITY HOUSING UNITS ARE PREA COMPLIANT.
- g) CORRECTIONS DIVISION DIRECTIVE 38 – ADMINISTRATIVE SEGREGATION – 1053 MANDATES INMATES AT HIGH RISK FOR SEXUAL VICTIMIZATION SHALL NOT BE PLACED IN INVOLUNTARY SEGREGATED HOUSING UNLESS AN ASSESSMENT OF ALL AVAILABLE ALTERNATIVES HAS BEEN MADE, AND A DETERMINATION HAS BEEN MADE THAT THERE IS NO AVAILABLE ALTERNATIVE MEANS OF SEPARATION FROM LIKELY ABUSERS. IF AN ASSESSMENT CANNOT BE CONDUCTED IMMEDIATELY, THE INMATE MAY BE PLACED IN INVOLUNTARILY SEGREGATED HOUSING FOR LESS THAN 24 HOURS WHILE COMPLETING THE ASSESSMENT. INTERVIEWS WITH PREA COORDINATOR AND PREA COMPLIANCE MANAGER INDICATES THERE ARE NO DEDICATED OR DESIGNATED FACILITIES FOR LGBTI INMATES AT THE WAYNE BROWN DETENTION FACILITY.

AUDITOR DETERMINES AGENCY MEETS STANDARD 115.42

Standard 115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) CORRECTIONS DIVISION DIRECTIVE 38 – ADMINISTRATIVE SEGREGATION – 1053 MANDATES INMATES AT HIGH RISK FOR SEXUAL VICTIMIZATION SHALL NOT BE PLACED IN INVOLUNTARY SEGREGATED HOUSING UNLESS AN ASSESSMENT OF ALL AVAILABLE ALTERNATIVES HAS BEEN MADE, AND A DETERMINATION HAS BEEN MADE THAT THERE IS NO AVAILABLE ALTERNATIVE MEANS OF SEPARATION FROM LIKELY ABUSERS. IF AN ASSESSMENT CANNOT BE CONDUCTED IMMEDIATELY, THE INMATE MAY BE PLACED IN INVOLUNTARILY SEGREGATED HOUSING FOR LESS THAN 24 HOURS WHILE COMPLETING THE ASSESSMENT. IN THE PAST `1 MONTHS, THERE HAVE BEEN NO INMATES AT RISK OF SEXUAL VICTIMIZATION HELD IN INVOLUNTARY SEGREGATED HOUSING FOR ONE TO 24 HOURS AWAITING COMPLETION OF ASSESSMENT. INTERVIEW WITH FACILITY COMMANDER INDICATES AGENCY PROHIBITS PLACING INMATES AT HIGH RISK FOR SEXUAL VICTIMIZATION OR ALLEGED SEXUAL ABUSE IN INVOLUNTARY SEGREGATION HOUSING UNLESS NO OTHER HOUSING IS AVAILABLE AT THE TIME TO ENSURE INMATES’S SAFETY. HOUSING REASSESSMENTS ARE DONE THROUGH CLASSIFICATION TO FIND ALTERNATIVE MEANS OF SEPARATION FROM POTENTIAL ABUSERS. AUDITOR OBSERVED AN INMATE IN SINGLE CELL MEDICAL HOUSING WHO WAS A VICTIM OF SEXUAL HARASSMENT. INMATE WAS INFORMALLY INTERVIEWED AND WAS PROVIDED ACCESS TO PROGRAMS AS HE AWAITED REHOUSING. AN ALTERNATIVE HOUSING UNIT WAS LOCATED THE NEXT DAY AND THE INMATE WAS REHOUSED. INMATE HAD BEEN IN MEDICAL SINGLE CELL FOR 2 DAYS SINCE THE ALLEGATION OF SEXUAL ABUSE/HARASSMENT.
 - b) CORRECTIONS DIVISION DIRECTIVE 38 – ADMINISTRATIVE SEGREGATION – 1053 MANDATES INMATES PLACED IN SEGREGATED HOUSING FOR THIS PURPOSE SHALL HAVE ACCESS TO PROGRAMS, PRIVILEGES, EDUCATION,

AND WORK OPPORTUNITIES. IF THE INMATE IS RESTRICTED ACCESS TO PROGRAMS, PRIVILEGES, EDUCATION, OR WORK OPPORTUNITIES, THE FOLLOWING WILL BE DOCUMENTED IN A JAIL INCIDENT REPORT:

1. THE OPPORTUNITIES THAT HAVE BEEN LIMITED;
2. THE DURATION OF THE LIMITATION; AND
3. THE REASONS FOR SUCH LIMITATIONS

DURING ON-SITE FACILITY REVIEW, AUDITOR OBSERVED AN INMATE IN SINGLE CELL MEDICAL HOUSING WHO WAS A VICTIM OF SEXUAL HARASSMENT. INMATE WAS INFORMALLY INTERVIEWED AND WAS PROVIDED ACCESS TO PROGRAMS AS HE AWAITED REHOUSING. AN ALTERNATIVE HOUSING UNIT WAS LOCATED THE NEXT DAY AND THE INMATE WAS REHOUSED. INMATE HAD BEEN IN MEDICAL SINGLE CELL FOR 2 DAYS SINCE THE ALLEGATION OF SEXUAL ABUSE/HARASSMENT.

- c) AGENCY REPORTS THAT NO INMATE WAS ASSIGNED TO INVOLUNTARY SEGREGATED HOUSING FOR LONGER THAN 30 DAYS WHILE AWAITING ALTERNATIVE PLACEMENT OVER THE PAST 12 MONTHS.
- d) DURING PRE-AUDIT PHASE, AGENCY REPORTED NO INMATES AT RISK OF SEXUAL VICTIMIZATION HELD IN INVOLUNTARY SEGREGATED HOUSING IN THE PAST 12 MONTHS. DURING THE ON-SITE FACILITY REVIEW, AUDITOR OBSERVED AN INMATE IN SINGLE CELL MEDICAL HOUSING WHO WAS A VICTIM OF SEXUAL HARASSMENT. INMATE WAS INFORMALLY INTERVIEWED AND WAS PROVIDED ACCESS TO PROGRAMS AS HE AWAITED REHOUSING. AN ALTERNATIVE HOUSING UNIT WAS LOCATED THE NEXT DAY AND THE INMATE WAS REHOUSED. INMATE HAD BEEN IN MEDICAL SINGLE CELL FOR 2 DAYS SINCE THE ALLEGATION OF SEXUAL ABUSE/HARASSMENT. THE ENTIRE SESSION HAD BEEN DOCUMENTED IN THE JAIL MANAGEMENT SYSTEM ON DAILY BASIS BY CLASSIFICATION STAFF.
- e) CORRECTIONS DIVISION DIRECTIVE 38 – ADMINISTRATIVE SEGREGATION – 1053 MANDATES THAT EVERY 30 DAYS, CLASSIFICATION SHALL AFFORD EACH INMATE HELD IN INVOLUNTARY SEGREGATED HOUSING A REVIEW TO DETERMINE WHETHER THERE IS A CONTINUING NEED FOR SEPARATION FROM THE GENERAL POPULATION. AGENCY REPORTS NO INMATES HELD IN INVOLUNTARY SEGREGATION OVER PAST 12 MONTHS.

AUDITOR DETERMINES AGENCY MEETS STANDARD 115.43

Standard 115.51 Inmate reporting

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 PROVIDES MULTIPLE INTERNAL METHODS FOR INMATES TO PRIVATELY REPORT SEXUAL ABUSE AND SEXUAL HARASSMENT AND RETALIATION BY STAFF OR INMATES THROUGH A TOLL FREE CONFIDENTIAL HOTLINE TO DVSAC WHICH IS TOLL FREE AND IS NOT RECORDED. THE CALIFORNIA ATTORNEY GENERAL'S PUBLIC INQUIRY UNIT, NATIONAL SEXUAL ASSAULT HOTLINE, PREA HOTLINE NUMBER IN THE INMATE PHONE SYSTEM. ALL ARE CONFIDENTIAL TOLL-FREE NUMBERS. THIS INFORMATION IS PROVIDED ON PAGE #32 OF THE INMATE HANDBOOK. INTERVIEWS WITH RANDOM SAMPLE OF 12 STAFF AND 15 INMATES INDICATE THEIR KNOWLEDGE AND TRAINING WITH REGARDS TO MULTIPLE WAYS TO REPORT SEXUAL ABUSE/HARASSMENT AND RETALIATION BOTH INTERNALLY AND PRIVATELY.
 - b) PREA POLICY DD-69 PROVIDES INMATE WITH THE PREA HOTLINE NUMBER IN THE INMATE PHONE SYSTEM. THIS INFORMATION IS PROVIDED ON PAGE #32 IN THE INMATE HANDBOOK. POLICY MANDATES INMATES DETAINED SOLELY FOR CIVIL IMMIGRATION PURPOSES BE PROVIDED INFORMATION ON HOW TO CONTACT RELEVANT CONSULAR OFFICIALS AND RELEVANT OFFICIALS IN THE DEPARTMENT OF HOMELAND SECURITY. THE INMATE HANDBOOK PROVIDES INFORMATION WHICH STATES THAT WHILE DETAINED BY THE DEPARTMENT OF JUSTICE, UNITED STATES MARSHALS SERVICE, YOU HAVE THE RIGHT TO BE SAFE AND FREE FROM SEXUAL HARASSMENT AND SEXUAL ASSAULTS. THE INFORMATION IS POSTED IN EACH HOUSING UNIT BULLETIN BOARD AT ALL CONTRACT DETENTION FACILITIES. IT ALSO INCLUDES REPORTING METHODS

WHICH INCLUDES THE OFFICE OF INSPECTOR GENERAL, US MARSHAL SERVICE. THERE IS NO INFORMATION IN HANDBOOK FOR INMATES DETAINED SOLELY FOR IMMIGRATION PURPOSES CONTACT INFORMATION TO RELEVANT CONSULAR OFFICIALS AND RELEVANT OFFICIALS AT THE DHS. INTERVIEW WITH PREA COMPLIANCE MANAGER AND RANDOM SAMPLE OF 15 INMATES INDICATE INMATES ARE PROVIDED REPORTING INFORMATION AND CONTACT NUMBERS ON POSTERS NEXT TO PHONES INSIDE THEIR HOUSING UNITS. MAJORITY OF INMATES INTERVIEWED EXHIBITED THEIR KNOWLEDGE AND EDUCATION WITH REGARDS TO THE METHODS THEY CAN REPORT ABUSE OR HARASSMENT TO A PUBLIC OR PRIVATE ENTITY.

- c) PREA POLICY DD-69 MANDATES EMPLOYEES SHALL ACCEPT ANY REPORTS MADE VERBALLY, IN WRITING, ANONYMOUSLY, AND FROM 3RD PARTIIES AND SHALL PROMPTLY DOCUMENT ANY VERBAL REPORTS. INTERVIEW WITH RANDOM SAMPLE OF STAFF & INMATES DETERMINE THEIR KNOWLEDGE AND EDUCATION REGARDING THE MULTIPLE METHODS TO REPORT, INCLUDING THROUGH 3RD PARTIES. STAFF INDICATE ONCE RECEIVING A 3RD PARTY REPORT, THEY ARE TO PROMPTLY DOCUMENT AND CONTACT THEIR SUPERVISOR. A LARGE MAJORITY OF INMATES ARE AWARE OF THEIR REPORTING RIGHTS.
- d) PREA POLICY DD-69 PROVIDES EMPLOYEES ARE ENCOURAGED TO FOLLOW THE CHAIN OF COMMAND WHEN REPORTING SEXUAL ABUSE OF INMATES. EMPLOYEES NOT COMFORTABLE WITH REPORTING VIOLATIONS OF THIS POLICY TO THEIR IMMEDIATE SUPERVISOR MAY BYPASS THE CHAIN OF COMMAND AND REPORT THE ALLEGATION TO ANY SUPERVISOR. THE CHAIN OF COMMAND DOES NOT NEED TO BE FOLLOWED. INTERVIEW WITH RANDOM SAMPLE OF 12 STAFF INDICATE THE MAJORITY INTERVIEWED ARE AWARE OF METHODS FOR INMATES AND TO PRIVATELY REPORT SEXUAL ABUSE.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.51 AS STANDARD PROVISIONS 115.51(b) AND 115.51(d) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

- 1. AGENCY TO AMEND INMATE HANDBOOK TO PROVIDE INFORMATION TO CONTACT RELEVANT CONSULAR OFFICIALS AND RELEVANT OFFICIALS AT THE DEPARTMENT OF HOMELAND SECURITY FOR INMATES DETAINED SOLELY FOR IMMIGRATION PURPOSES.
- 2. AGENCY TO AMEND POLICY DD-69 TO INFORM STAFF OF SPECIFIC METHODS THEY MAY UTILIZE TO PRIVATELY REPORT SEXUAL ABUSE AND SEXUAL HARASSMENT OF INMATES.

CORRECTIVE ACTION COMPLETION 8/6/16:

- 1. AGENCY AMENDED INMATE HANDBOOK TO PROVIDE CONTACT INFORMATION TO HOMELAND SECURITY FOR INMATES DETAINED SOLELY FOR IMMIGRATION PURPOSES. HANDBOOK NARRATIVE ALSO INFORMS INMATES THEY WILL PROVIDE INFORMATION FOR CONTACTING RELEVANT CONSULAR OFFICIALS UPON REQUEST THROUGH WRITING OR KIOSK. INMATES ARE REMEMBERED TO INCLUDE THE COUNTRY IN ORDER TO BE PROVIDED THE CORRECT CONTACT INFORMATION. AGENCY COMPLIES WITH STANDARD PROVISION 115.51(b).
- 2. AGENCY AMENDED PREA POLICY DD-69 TO PROVIDE STAFF WITH METHOD TO PRIVATELY REPORT SEXUAL HARASSMENT AND SEXUAL ABUSE OF INMATES THROUGH HUMAN RESOURCES. NARRATIVE ALSO INDICATES STAFF IS ENCOURAGED TO REPORT THROUGH THE CHAIN OF COMMAND BUT THIS ENCOURAGEMENT IS NOT MANDATORY AS THEY CAN GO OVER THE CHAIN OF COMMAND TO REPORT ALLEGATIONS OF SEXUAL ABUSE/HARASSMENT SHOULD THEY CHOOSE. AGENCY COMPLIES WITH STANDARD PROVISION 115.51(d).

AGENCY COMPLIES WITH STANDARD PROVISIONS 115.51(b) & 115.51(d)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.51.

Standard 115.52 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 COVERS GREIVANCE PROCEDURES TO ADDRESS INMATE GRIEVANCES REGARDING SEXUAL ABUSE. GRIEVANCE PROCEDURE IS OUTLINED IN THE INMATE HANDBOOK. THE PROCEDURE IS SAME AS IDENTIFIED IN PREA POLICY DD-69.
- b) PREA POLICY DD-69 MANDATES NO TIME LIMIT ON WHEN AN INMATE MAY SUBMIT A GRIEVANCE OF AN ALLEGED INCIDENT OF SEXUAL ABUSE. AGENCY SHALL NOT REQUIRE AN INMATE TO USE ANY INFORMAL GRIEVANCE PROCESS, OR TO OTHERWISE ATTEMPT TO RESOLVE WITH STAFF, AN ALLEGED INCIDENT OF SEXUAL ABUSE. GRIEVANCE PROCEDURE IS OUTLINED IN THE INMATE HANDBOOK.
- c) PREA POLICY DD-69 MANDATES AN INMATE WHO ALLEGES SEXUAL ABUSE MAY SUBMIT A GRIEVANCE WITHOUT SUBMITTING IT TO A STAFF MEMBER WHO IS THE SUBJECT OF THE COMPLAINT AND SUCH GRIEVANCE SHALL NOT BE REFERRED TO THE STAFF MEMBER WHO IS THE SUBJECT OF THE COMPLAINT. GRIEVANCE PROCEDURE IS OUTLINED IN THE INMATE HANDBOOK. AUDITOR REVIEWED 7 GRIEVANCES (6 OF THESE GREIVANCES WERE SUBMITTED BY THE SAME INMATE). A NUMBER OF THESE GRIEVANCES INDICATED THAT EITHER THE GRIEVANCE HAD TO BE GIVEN TO OR RESPONDED BY STAFF WHO WAS A SUBJECT OF THE GRIEVANCE. AUDITOR'S OBSERVATION OF THE GREIVANCE PROCEDURES AND INTERVIEW WITH INMATES DETERMINE INMATES DO NOT HAVE A VEHICLE TO SUBMIT A GRIEVANCE ANNONYMOUSLY OR ENSURE GRIEVANCE IS NOT GIVEN TO A STAFF MEMBER WHO IS THE SUBJECT OF THE COMPLAINT. CURRENT PRACTICE REQUIRES INMATES TO OBTAIN A GREIVANCE FORM FROM CUSTODY STAFF, USUALLY THE POD OFFICER, AND ONCE COMPLETED, RETURN IT TO THE POD OFFICER FOR PROCESSING. CURRENT PRACTICE IS NON-COMPLIANT WITH THIS STANDARD PROVISION.
- d) PREA POLICY DD-69 MANDATES FINAL AGENCY DECISIONS ON THE MERITS OF ANY PORTION OF A GRIEVANCE ALLEGING SEXUAL ABUSE SHALL BE ISSUED WITHIN 90 DAYS OF THE INITIAL FILING OF THE GRIEVANCE. AN EXTENSION OF TIME TO RESPOND, OF UP TO 70 DAYS, MAY BE CLAIMED IF THE NORMAL TIME PERIOD FOR RESPONSE IS INSUFFICIENT TO MAKE AN APPROPRIATE DECISION. THE INMATE SHALL BE NOTIFIED, IN WRITING, OF ANY SUCH EXTENSION WHICH PROVIDES A DATE BY WHICH A DECISION WILL BE MADE. COMPUTATION OF THE 90-DAY TIME PERIOD SHALL NOT INCLUDE TIME CONSUMED BY THE INMATES IN PREPARING ANY ADMINISTRATIVE APPEAL. AGENCY REPORTS NO GRIEVANCES ALLEGING SEXUAL ABUSE WERE FILED OVER THE PAST 12 MONTHS. AUDITOR'S REVIEW OF GREIVANCES DETERMINES ALL RESPONSES ARE PROVIDED PROMPTLY.
- e) PREA POLICY DD-69 MANDATES WHENEVER THE NEVADA COUNTY CORRECTIONS DIVISION IS NOTIFIED BY A THIRD PARTY, INCLUDING OTHER INMATES, WHICH AN INMATE HAS BEEN SEXUALLY ABUSED IT SHALL CONSIDER SUCH NOTIFICATION AS A GRIEVANCE OR REQUEST FOR INFORMAL RESOLUTION SUBMITTED ON BEHALF OF THE ALLEGED INMATE VICTIM. THE ALLEGED VICTIM SHALL BE INFORMED THAT A GRIEVANCE HAS BEEN SUBMITTED ON HIS/HER BEHALF AND IT SHALL BE PROCESSED UNDER THE NORMAL PROCEDURES UNLESS THE ALLEGED VICTIM EXPRESSLY REQUESTS THAT IT NOT BE PROCESSED. SUCH A REQUEST SHALL BE DOCUMENTED. AGENCY REPORTS THERE HAVE BEEN NO GRIEVANCES FILED OVER THE PAST 12 MONTHS ALLEGING SEXUAL ABUSE WHERE 3RD PARTY ASSISTANCE HAD BEEN DECLINED.
- f) PREA POLICY DD-69 MANDATES AN INMATE MAY FILE AN EMERGENCY GRIEVANCE WHEN THE INMATE IS SUBJECT TO A SUBSTANTIAL RISK OF IMMINENT SEXUAL ABUSE. AFTER RECEIVING SUCH AN EMERGENCY GRIEVANCE, THE FORM SHALL BE FORWARDED TO A LEVEL OF REVIEW AT WHICH CORRECTIVE ACTION MAY BE TAKEN, PROVIDE AN INITIAL RESPONSE WITHIN FORTY-EIGHT (48) HOURS, AND A DECISION MADE WITHIN FIVE (5) CALENDAR DAYS. IF THE GRIEVANCE IS DETERMINED NOT TO BE AN EMERGENCY, THE GRIEVANCE

MAY BE PROCESSED AS NORMAL, OR RETURNED TO THE INMATE AND REQUIRED TO FOLLOW NORMAL GRIEVANCE PROCEDURES. THE INMATE SHALL BE PROVIDED WITH A WRITTEN EXPLANATION OF WHY THE GRIEVANCE DOES NOT QUALIFY AS AN EMERGENCY. AGENCY REPORTS THERE HAVE BEEN NO INSTANCES OF EMERGENCY GRIEVANCES BEING FILED IN THE PAST 12 MONTHS.

- g) PREA POLICY DD-69 MANDATES AN INMATE MAY BE DISCIPLINED IF THEY INTENTIONALLY FILE A GRIEVANCE RELATED TO ALLEGED SEXUAL ABUSE IF IT IS DEMONSTRATED THAT THE INMATE FILED THE GRIEVANCE IN BAD FAITH. THERE HAVE BEEN NO DISCIPLINARY ACTIONS RELATED TO INMATES FILING GRIEVANCES IN BAD FAITH OVER PAST 12 MONTHS.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.52 AS STANDARD PROVISION AND 115.52(c) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO PROVIDE A METHOD FOR INMATES TO OBTAIN GRIEVANCE FORMS AND SUBMIT GRIEVANCE FORMS WITHOUT HAVING TO OBTAIN OR SUBMIT FORMS TO STAFF.
2. AGENCY TO PROVIDE A METHOD FOR INMATES TO SUBMIT GRIEVANCE FORMS ANONYMOUSLY.
3. AGENCY TO EDUCATE INMATES REGARDING THE METHOD PROVIDED FOR ANONYMOUS SUBMISSION OF GRIEVANCES AND OBTAINING GRIEVANCE FORMS.

CORRECTIVE ACTION COMPLETION 10/11/16:

AUDITOR CONDUCTED CORRECTIVE ACTION ON-SITE PHYSICAL PLANT REVIEW ON 10/11/16 AND VERIFIED THE FOLLOWING:

1. AGENCY PROVIDED GRIEVANCE FORMS IN EACH HOUSING SECTION FOR IMMEDIATE ACCESS BY INMATES WITHOUT HAVING TO GO THROUGH THE OFFICER TO OBTAIN ONE. AGENCY COMPLIES WITH STANDARD PROVISION 115.52(c)
2. AGENCY PROVIDED LOCK BOXES INSTALLED AT EACH POD FOR CONFIDENTIAL SUBMISSION OF GRIEVANCE FORMS. BOXES ARE ONLY ACCESSIBLE BY SHIFT SERGEANTS OR HIGHER. GRIEVANCES ARE OBTAINED BY SERGEANTS AT LEAST ONCE EACH SHIFT. AGENCY COMPLIES WITH STANDARD PROVISION 115.52(c).
3. AGENCY AMENDED INMATE HANDBOOK TO PROVIDE UPDATED GRIEVANCE PROCEDURES REGARDING SEXUAL ABUSE REPORTING. AGENCY COMPLIES WITH STANDARD PROVISION 115.52(c).

AGENCY COMPLIES WITH STANDARD PROVISION 115.52(c)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.52

Standard 115.53 Inmate access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 AND INMATE HANDBOOK PROVIDES TOLL FREE HOTLINE TO DOMESTIC VIOLENCE SEXUAL ASSAULT COALITION WHICH IS POSTED NEXT TO ALL INMATE TELEPHONES. HOTLINE IS

CONFIDENTIAL. POLICY INDICATES HOTLINE IS NOT RECORDED OR MONITORED AT THE FACILITY. HANDBOOK PROVIDES INFORMATION TO INMATES TO STATE THE HOTLINE NUMBER IS NOT MONITORED. POLICY PROVIDES NARRATIVE ON INFORMATION OR ACCESS TO OUTSIDE VICTIM ADVOCATES FOR EMOTIONAL SUPPORT. ACCESS INFORMATION IS PROVIDED IN THE INMATE HANDBOOK. INMATE HANDBOOK PROVIDES TOLL-FREE NUMBERS TO THE NATIONAL SEXUAL ASSAULT HOTLINE, AND CALIFORNIA ATTORNEY GENERAL'S PUBLIC INQUIRY UNIT AND STATES THE NUMBERS ARE CONFIDENTIAL. INTERVIEW WITH RANDOM SAMPLE OF 15 INMATES INDICATE THEY ARE KNOWLEDGEABLE OF OUTSIDE VICTIM ADVOCATES FOR EMOTIONAL SUPPORT. A NUMBER OF INMATES INTERVIEWED HAVE USED THE SERVICES PROVIDED.

- b) AGENCY REPORTS THEY INFORM INMATES, PRIOR TO GIVING THEM ACCESS TO OUTSIDE SUPPORT SERVICES, THE EXTENT TO WHICH SUCH COMMUNICATIONS WILL BE MONITORED. THIS INFORMATION IS PROVIDED IN PREA POLICY DD-69. REVIEW OF THE INMATE HANDBOOK REVEALS AGENCY INFORMS INMATES, PRIOR TO GIVING THEM ACCESS TO OUTSIDE SUPPORT SERVICES OF THE MANDATORY REPORTING RULES GOVERNING, CONFIDENTIALITY, AND/OR PRIVILEGE THAT APPLY TO DISCLOSURES OF SEXUAL ABUSE MADE TO OUTSIDE VICTIM ADVOCATES. HANDBOOK FAILS TO INFORM INMATES OF THE LIMITS TO CONFIDENTIALITY UNDER RELEVANT FEDERAL, STATE OR LOCAL LAW. INTERVIEW WITH INMATES INDICATE MOST ARE CONFIDENT INFORMATION PROVIDED TO VICTIM ADVOCACY IS CONFIDENTIAL, HOWEVER, THE MAJORITY OF INMATES INTERVIEWED ARE NOT AWARE OF THE LIMITS OF CONFIDENTIALITY.
- c) AGENCY REPORTS IT MAINTAINS MOU OR AGREEMENTS WITH COMMUNITY SERVICE PROVIDERS TO PROVIDE INMATES WITH EMOTIONAL SUPPORT SERVICES RELATED TO SEXUAL ABUSE. AGENCY ALSO INDICATES IT DOES NOT MAINTAIN COPIES OF ANY AGREEMENTS, NOR HAVE THEY ATTEMPTED TO ENTER INTO MOUs OR AGREEMENTS WITH SAID PROVIDERS. AGENCY PROVIDED BLANK MOU WITH DOMESTIC VIOLENCE AND SEXUAL ASSAULT COALITION. DURING ON-SITE FACILITY REVIEW, AGENCY PROVIDED AUDITOR WITH WRITTEN DOCUMENTATION WHICH VERIFIES COMMUNICATION BETWEEN DOMESTIC VIOLENCE AND SEXUAL ASSAULT COALITION DIRECTOR AND THE CONTRACT ADMINISTRATOR IN AN ATTEMPT TO RATIFY THE UNSIGNED MOU PREVIOUSLY PROVIDED TO AUDITOR. DURING INTERVIEWS WITH INMATES, A DVSAC ADVOCATE WAS ON SITE AND MADE AVAILABLE IN THE EVENT INMATES WERE IN NEED OF EMOTIONAL SUPPORT. AUDITOR IS CONFIDENT THE WORKING RELATIONSHIP BETWEEN DVSAC WILL BECOME STRONGER UPON RATIFICATION OF THE MOU AS THE DOCUMENTED COMMUNICATION INDICATES.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.53 AS STANDARD PROVISIONS 115.53(b) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

- 1. AGENCY TO AMEND INMATE HANDBOOK TO PROVIDE NARRATIVE WHICH STATES THE LIMITS OF CONFIDENTIALITY OF OUTSIDE SUPPORT SERVICES UNDER RELEVANT FEDERAL, STATE OR LOCAL LAW.

CORRECTIVE ACTION COMPLETION 8/6/16:

AGENCY AMENDED INMATE HANDBOOK WHICH PROVIDES LIMITS OF CONFIDENTIALITY AND MONITORING LIMITS FOR OUTSIDE SUPPORT SERVICES UNDER RELEVANT FEDERAL, STATE OR LOCAL LAW. AGENCY COMPLIES WITH STANDARD PROVISION 115.53(b).

AGENCY COMPLIES WITH STANDARD 115.53(b)

AUDITOR DETERMINES AGENCY MEETS STANDARD 115.53.

Standard 115.54 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY 2-1 MANDATES INMATES, VISITORS, OFFENDER FAMILY MEMBERS/ASSOCIATES AND OTHER COMMUNITY MEMBERS CAN PRIVATELY REPORT ALLEGATIONS OF SEXUAL ABUSE AND SEXUAL HARASSMENT, ANY RETALIATION BY OTHER INMATES OR STAFF FOR REPORTING SEXUAL HARASSMENT OR SEXUAL ABUSE, ANY STAFF NEGLIGENCE OR VIOLATION OF RESPONSIBILITIES THAT MAY HAVE CONTRIBUTED TO SUCH INCIDENTS IN THE FOLLOWING WAYS:

CONFIDENTIAL HOTLINE:

THE TOLL FREE NUMBER FOR DVSAC WILL BE POSTED NEXT TO ALL INMATE TELEPHONES AND IS AVAILABLE TO ANYONE. ALL CALLS TO THE HOTLINE ARE CONFIDENTIAL AND WILL NOT BE RECORDED OR MONITORED AT THE FACILITY

- INMATE PHONE SYSTEM
- VERBAL COMPLAINTS:
- WRITTEN COMPLAINTS:
- THROUGH THE INMATE KIOSK SYSTEM.
- WRITTEN NOTES OR LETTERS TO STAFF OR ADMINISTRATORS
- LETTERS DIRECTED TO THE PREA COORDINATOR.
- INMATE GRIEVANCE FORM.
- NEVADA COUNTY WEBSITE
- EMPLOYEES SHALL ACCEPT ANY REPORTS MADE VERBALLY, IN WRITING, ANONYMOUSLY, AND FROM THIRD PARTIES AND SHALL PROMPTLY DOCUMENT ANY VERBAL REPORTS.

THIS INFORMATION IS PROVIDED IN THE INMATE HANDBOOK AND THE NEVADA COUNTY SHERIFF'S WEBSITE. PUBLIC INFORMATION PROVIDED ON HOW TO REPORT SEXUAL ABUSE AND SEXUAL HARASSMENT ON BEHALF OF THE INMATE WITH SPECIFIC CONTACT INFORMATION FOR 3RD PARTY REPORTING.

RECOMMENDATION: ALTHOUGH AGENCY PROVIDES 3RD PARTY ON THE AGENCY WEBSITE, IN THE EVENT 3RD PARTY ENTITIES DO NOT HAVE ACCESS TO THE INTERNET, AGENCY SHOULD ALSO PROVIDE 3RD PARTY REPORTING INFORMATION VIA POSTER IN THE VISITING WAITING ROOM AND/OR ALONG HALLWAY LEADING TO VISITING AREAS FOR EACH HOUSING UNIT.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.54

Standard 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES STAFF TO IMMEDIATELY REPORT ANY KNOWLEDGE, SUSPICION, OR INFORMATION REGARDING AN INCIDENT OF SEXUAL ABUSE OR SEXUAL HARASSMENT THAT OCCURRED IN A

FACILITY, WHETHER OR NOT IT IS PART OF THE AGENCY. THIS INCLUDES ANY RETALIATION AGAINST INMATES OR STAFF WHO REPORTED SUCH AN INCIDENT AND ANY STAFF NEGLIGENCE OR VIOLATION OF RESPONSIBILITIES THAT MAY HAVE CONTRIBUTED TO AN INCIDENT OR RETALIATION. INTERVIEW WITH RANDOM SAMPLE OF 12 STAFF INDICATE THEIR KNOWLEDGE & TRAINING WITH REGARDS TO THEIR RESPONSIBILITIES TO AN INCIDENT OF SEXUAL ABUSE OR HARASSMENT. AUDITOR VERIFIED DEMONSTRATED PRACTICE DURING REVIEW OF INVESTIGATIONS OF ALLEGATIONS OF SEXUAL ABUSE/HARASSMENT.

- b) PREA POLICY DD-69 MANDATES SUCH ALLEGATIONS SHALL BE TREATED WITH DISCRETION AND TO THE EXTENT PERMITTED BY LAW, CONFIDENTIALLY. APART FROM REPORTING TO DESIGNATED SUPERVISORS OR OFFICIALS, EMPLOYEES SHALL NOT REVEAL ANY INFORMATION RELATED TO A SEXUAL ABUSE REPORT TO ANYONE OTHER THAN THOSE WHO NEED TO KNOW, AS SPECIFIED IN THIS POLICY, TO MAKE TREATMENT, INVESTIGATION, AND OTHER SECURITY AND MANAGEMENT DECISIONS. INTERVIEW WITH RANDOM SAMPLE OF STAFF INDICATE THEY PROVIDE INFORMATION REGARDING A SEXUAL ABUSE REPORT ONLY TO THOSE ON A NEED TO KNOW BASIS.
- c) PREA POLICY DD-69 MANDATES MEDICAL AND MENTAL HEALTH PRACTITIONERS REQUIREMENT TO REPORT SEXUAL ABUSE. POLICY ALSO MANDATES MEDICAL AND MENTAL HEALTH PRACTITIONERS TO INFORM INMATES OF THEIR DUTY TO REPORT AND THE LIMITATIONS OF CONFIDENTIALITY AT THE INITIATION OF SERVICES. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS INDICATE THEY PROVIDE INMATES WITH LIMITS OF CONFIDENTIALITY AND DUTY TO REPORT. BOTH ADMIT THERE IS ONLY A HIPPA FORM WHICH WAS PROVIDED TO AUDITOR, BUT DOES NOT SPECIFY LIMITS OF CONFIDENTIALITY AND DUTY TO REPORT. BOTH INDICATE THERE IS NOT SPECIFIC CONSENT FORM WHICH PROVIDES NARRATIVE IN COMPLIANCE WITH STANDARD PROVISION 115.61. AUDITOR IS UNABLE TO VERIFY COMPLIANCE WITH THIS STANDARD PROVISION.
- d) PREA POLICY DD-69 MANDATES THE REPORTING OF ALLEGATION OF SEXUAL ABUSE FOR ALLEGED VICTIM UNDER THE AGE OF 18 OR VULNERABLE ADULT UNDER A STATE OR LOCAL VULNERABLE PERSONS STATUTE. AGENCY INVESTIGATES BOTH ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS. INTERVIEW WITH FACILITY COMMANDER AND PREA COORDINATOR INDICATE IMMEDIATE INVESTIGATIONS ARE LAUNCHED SHOULD VICTIM BE UNDER THE AGE OF 18 YEARS OR VULNERABLE ADULT. TO ADD, CPS IS INFORMED SHOULD THE VICTIM BE UNDER THE AGE OF 18 YEARS AND ADJULT PROTECTIVE SERVICES IS INFORMED FOR IN THE CASE OF VULNERABLE ADULTS UNDER STATE OR LOCAL VULNERABLE PERSONS STATUTE.
- e) PREA POLICY DD-69 MANDATES STAFF SHALL REPORT IMMEDIATELY ALL ALLEGATIONS OF SEXUAL ABUSE AND SEXUAL HARASSMENT, INCLUDING THIRD-PARTY AND ANONYMOUS REPORTS TO THE FACILITY'S INVESTIGATOR AS DESIGNATED BY THE FACILITY COMMANDER. FACILITY COMMANDER INDICATE SAME DURING INTERVIEW.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.61 AS STANDARD PROVISIONS 115.61(c) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO CREATE AND PROVIDE A FORM WHICH INFORMS INMATES OF THE MENTAL HEALTH AND MEDICAL PRACTITIONERS DUTY TO REPORT AND THE LIMITATIONS OF CONFIDENTIALITY AT THE INITIATION OF SERVICES. THERE SHOULD BE A SIGNATURE AND DATE AREA FOR BOTH STAFF AND INMATE.
2. AGENCY TO AMEND CFMG POLICY AND/OR PREA POLICY DD-69 MANDATING THE USE OF THE ABOVE CONSENT FORM BY MEDICAL AND MENTAL HEALTH STAFF PRIOR TO THE INITIATION OF SERVICES.

CORRECTIVE ACTION COMPLETION 10/11/16:

AGENCY PROVIDED AUDITOR WITH ACKNOWLEDGEMENT OF MANDATORY REPORTING AND CONSENT FORM FROM THE CMGC MEDICAL GROUP WHICH PROVIDES MEDICAL AND MENTAL HEALTH SERVICES FOR THE AGENCY. THE FORM PROVIDES BOTH LIMITS OF CONFIDENTIALITY AND DUTY TO REPORT INFORMATION TO BE PROVIDED TO INMATES PRIOR TO THE INITIATION OF SERVICES AND THE INMATES MUST SIGN THE FORM TO ACKNOWLEDGE RECEIPT OF THIS INFORMATION IN ACCORDANCE WITH STANDARD PROVISION 115.61(c).

AGENCY AMENDED CMGC POLICY TO MANDATE USE OF THE ABOVE IDENTIFIED CONSENT FORM BY BOTH MENTAL AND MEDICAL HEALTH STAFF PRIOR TO THE INITIATION OF SERVICES IN ACCORDANCE WITH STANDARD PROVISION 115.61(c).

AGENCY COMPLIES WITH STANDARD PROVISION 115.61(c)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.61

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

1. PREA POLICY DD-69 MANDATES THAT WHEN THE FACILITY LEARNS THAT AN INMATE IS SUBJECT TO A SUBSTANTIAL RISK OF IMMINENT SEXUAL ABUSE IMMEDIATE ACTION SHALL BE TAKEN TO PROTECT THE INMATE. AGENCY REPORTS NO INMATE WAS SUBJECT TO SUBSTANTIAL RISK OF IMMINENT SEXUAL ABUSE OVER THE PAST 12 MONTHS. INTERVIEWS WITH AGENCY HEAD, FACILITY COMMANDER AND RANDOM SAMPLE OF 12 STAFF INDICATE ONCE INFORMED OF ALLEGATION OF IMMINENT SEXUAL ABUSE, STAFF TAKE IMMEDIATE ACTION TO PROTECT THE INMATE, INFORM SUPERVISOR AND INVESTIGATE PENDING REHOUSING OF VICTIM OR PERPETRATOR PER CLASSIFICATION, VICTIM SAFETY AND HOUSING AVAILABILITY.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.61

Standard 115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES UPON RECEIVING AN ALLEGATION THAT AN INMATE WAS SEXUALLY ABUSED WHILE CONFINED AT ANOTHER FACILITY, THE FACILITY COMMANDER SHALL NOTIFY THE HEAD OF THE FACILITY OR APPROPRIATE OFFICE OF THE AGENCY WHERE THE ALLEGED ABUSE OCCURRED. AGENCY REPORTS THAT OVER THE PAST 12 MONTHS, FACILITY HAS NOT RECEIVED ANY ALLEGATIONS THAT INMATES WERE ABUSED WHILE CONFINED AT ANOTHER FACILITY.
- b) PREA POLICY DD-69 MANDATES THAT NOTIFICATION SHALL BE PROVIDED AS SOON AS POSSIBLE, BUT NO LATER THAN 72 HOURS AFTER RECEIVING THE ALLEGATION.
- c) PREA POLICY DD-69 MANDATES SUCH NOTIFICATION SHALL BE DOCUMENTED.

- d) PREA POLICY DD-69 MANDATES THAT IF THE FACILITY COMMANDER RECEIVES NOTIFICATION FROM OTHER FACILITIES OR AGENCIES THE FACILITY SHALL INVESTIGATE THESE REPORTS IN ACCORDANCE WITH THE PREA STANDARDS. INTERVIEWS WITH AGENCY HEAD AND FACILITY COMMANDER INDICATE POLICY IS FOLLOWED TO INCLUDE RISK ASSESSMENT. DESIGNATED CONTACT POINTS ARE LT AND ABOVE AND UNDERSHERIFF IS INFORMED ON EACH INSTANCE. CASES ARE INVESTIGATED IN THE SAME FASHION AS ALL SEXUAL ABUSE/HARASSMENT CASES.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.63

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 MANDATES UPON LEARNING OF AN ALLEGATION THAT AN INMATE WAS SEXUALLY ABUSED THE CORRECTIONAL EMPLOYEE SHALL SEPARATE THE ALLEGED VICTIM AND ABUSER; PRESERVE AND PROTECT ANY CRIME SCENE UNTIL THE APPROPRIATE STEPS CAN BE TAKEN TO COLLECT ANY EVIDENCE AND IF THE ABUSE OCCURRED WITHIN A TIME THAT STILL ALLOWS FOR THE COLLECTION OF PHYSICAL EVIDENCE, REQUEST THAT THE ALLEGED VICTIM NOT TAKE ANY ACTIONS THAT COULD DESTROY PHYSICAL EVIDENCE, INCLUDING, AS APPROPRIATE, WASHING, BRUSHING TEETH, CHANGING CLOTHES, URINATING, DEFECATING, SMOKING, DRINKING OR EATING. AGENCY REPORTS THERE HAVE BEEN 9 ALLEGATIONS OF SEXUAL ABUSE IN THE PAST 12 MONTHS, NONE OF WHICH INVOLVED A 1ST SECURITY STAFF MEMBER. INTERVIEWS WITH INMATES WHO REPORTED SEXUAL ABUSE INDICATE RESPONSE TO THEIR ALLEGATIONS WERE PROMPTLY INITIATED. REVIEW OF ALL 9 ALLEGATIONS OF SEXUAL ABUSE VERIFY AGENCY'S COMPLIANCE WITH STANDARD PROVISION 115.64(a).
- b) PREA POLICY DD-69 MANDATES THAT IF THE PERSON NOTIFIED IS A VOLUNTEER OR CONTRACTOR, THE RESPONDER SHALL BE REQUIRED TO REQUEST THAT THE ALLEGED VICTIM NOT TAKE ANY ACTIONS THAT COULD DESTROY PHYSICAL EVIDENCE, AND THEN NOTIFY CORRECTIONAL STAFF. NO ALLEGATIONS OF INMATE SEXUAL ABUSE IN PAST 12 MONTHS.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.64

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

PREA POLICY DD-69 PROVIDES COORDINATED ACTIONS TAKEN IN RESPONSE TO AN INCIDENT OF SEXUAL ABUSE AMONG STAFF 1ST RESPONDERS, MEDICAL AND MENTAL HEALTH PRACTITIONERS, INVESTIGATORS AND FACILITY LEADERSHIP SPECIFIC TO THE WAYNE BROWN CORRECTIONAL FACILITY:

COORDINATED RESPONSE (§ 115.65):

- A. ALL ALLEGATIONS OF SEXUAL ABUSE, INCLUDING THIRD-PARTIES AND ANONYMOUS REPORTS SHALL BE REPORTED TO THE FACILITY COMMANDER OR HIS DESIGNEE.
- B. THE SHIFT SERGEANT OR OIC SHALL NOTIFY DISPATCH (911) AND REQUEST A NEVADA COUNTY SHERIFFS OFFICER TO RESPOND.
- C. IF THE VICTIM ALLEGES HE/SHE WAS INVOLVED WITH OR ASSAULTED BY STAFF, THE FACILITY COMMANDER SHALL ALSO NOTIFY THE INTERNAL AFFAIRS UNIT.
- D. THE INMATE SHALL BE TRANSPORTED TO THE HOSPITAL FOR A FORENSIC EXAMINATION.
- E. IF ANY LIFE-THREATENING INJURIES EXIST, RESPONSE MAY INCLUDE THE NEED TO REQUEST EMERGENCY TRANSPORTATION (I.E., AMBULANCE). WHEN THE CALL IS MADE TO REQUEST AN AMBULANCE, IT IS CRITICAL TO INFORM THE FIRE/RESCUE DISPATCHER THAT THE INJURED INMATE IS A VICTIM OF SEXUAL ASSAULT.
 - 1. MEDICAL STAFF SHALL BE COGNIZANT TO MAINTAIN INTACT ANY PHYSICAL EVIDENCE WHICH MAY BE FOUND ON THE VICTIM'S PERSON OR CLOTHING.
 - 2. FOLLOW-UP TESTING FOR PREGNANCY, SEXUALLY TRANSMITTED INFECTIONS/DISEASES AND HIV WILL BE OFFERED AS CLINICALLY INDICATED AND WILL BE THE RESPONSIBILITY OF THE HOSPITAL.
- F. THE INMATE SHALL BE ASSIGNED A CUSTODY ESCORT WHO SHALL REMAIN WITH THE VICTIM FOR THE ENTIRE PROCESS, WHENEVER POSSIBLE.
 - 1. GENDER PREFERENCE SHOULD BE CONSIDERED WHEN ASSIGNING A CUSTODY ESCORT TO THE VICTIM. THE CUSTODY ESCORT WILL ENSURE EFFECTIVE COMMUNICATION (I.E., COMPLEXITY OF THE ISSUES, LANGUAGE BARRIERS, AND LITERACY).
 - 2. THE ESCORT SHALL NOT BE PRESENT IN THE EXAMINATION ROOM DURING THE SEXUAL ASSAULT EXAMINATION, UNLESS REQUESTED BY THE VICTIM OR HOSPITAL STAFF, OR ORDERED BY THE FACILITY COMMANDER.
- G. AT THE TIME THE VICTIM IS SENT TO THE HOSPITAL, THE FACILITY COMMANDER IS REQUIRED TO CONTACT THE RAPE CRISIS CENTER TO REQUEST A VICTIM SEXUAL ASSAULT ADVOCATE BE DISPATCHED TO THE HOSPITAL.
- H. UPON RETURN TO THE JAIL, ALL VICTIMS OF A SEXUAL ASSAULT SHALL BE REFERRED TO BEHAVIORAL HEALTH FOR AN URGENT SUICIDE RISK ASSESSMENT. MENTAL HEALTH STAFF SHALL EVALUATE THE VICTIM WITHIN FOUR (4) HOURS OF REFERRAL. UNTIL THAT TIME, THE INMATE SHALL BE PLACE UNDER CONSTANT DIRECT SUPERVISION TO ENSURE HE/SHE DOES NOT ATTEMPT TO HURT HIMSELF/HERSELF OR SOMEONE ELSE.
- I. BEHAVIORAL HEALTH SHALL BE RESPONSIBLE TO MONITOR VICTIMS FOR SUICIDAL IMPULSES, POST-TRAUMATIC STRESS DISORDER, DEPRESSION, AND OTHER MENTAL HEALTH CONSEQUENCES.
- J. THE VICTIM SHALL BE OFFERED CRISIS INTERVENTION COUNSELING, APPROPRIATE TO THE INDIVIDUAL NEEDS OF THE VICTIM.

INTERVIEW WITH FACILITY COMMANDER INDICATES THERE IS A COORDINATED RESPONSE PLAN WHICH PROVIDES PROTOCOLS FOR ALL DEPARTMENT TO TAKE ACTION IN CASES OF SEX ABUSE ALLEGATIONS.

AUDITOR DETERMINED AGENCY MEETS STANDARD 115.65

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) AGENCY REPORTS THEY ARE NOT RESPONSIBLE FOR COLLECTIVE BARGAINING ON THE AGENCY'S BEHALF OR ENTERED INTO OR RENEWED ANY COLLECTIVE BARGAINING AGREEMENT OR OTHER AGREEMENT SINCE AUGUST 20, 2012. IN DISCUSSIONS WITH PREA COORDINATOR, THERE HAVE BEEN BARGAINING

UNIT RENEWALS OR CONTRACTS THAT HAVE BEEN ENTERED INTO AFTER AUGUST 20, 2012. INTERVIEW WITH AGENCY HEAD DESIGNEE INDICATES THERE ARE 4 JAIL CONTRACTS: CORRECTIONAL OFFICERS, LOCAL 39, DEPUTY SHERIFF'S ASSOCIATION AND SHERIFF'S MANAGEMENT ASSOCIATION. PRIOR TO THE ON-SITE AUDIT, AUDITOR REQUESTED COPIES OF COLLECTIVE BARGAINING AGREEMENTS OR SPECIFIC PAGE(S) OF SAID AGREEMENTS THAT REFER TO STAFF DISCIPLINE AND HOW STAFF IS TO BE TREATED DURING AN INVESTIGATION. TO DATE, AUDITOR HAS NOT BEEN PROVIDED A COPY OF THE COLLECTIVE BARGAINING AGREEMENTS WHICH HAVE BEEN ENTERED INTO OR RENEWED SINCE AUGUST 20, 2012 FOR REVIEW AND VERIFICATION FOR COMPLIANCE WITH STANDARD PROVISION 115.66(a).

b) N/A – NOT APPLICABLE TO THIS AGENCY PER DOJ.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.66 AS STANDARD PROVISIONS 115.66(a) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO PROVIDE AUDITOR WITH COLLECTIVE BARGAINING AGREEMENTS ENTERED INTO OR RENEWED SINCE AUGUST 20, 2012 OR SPECIFIC PAGES OF SAID AGREEMENTS DURING THAT SAME PERIOD OF TIME, THAT REFER TO STAFF DISCIPLINE AND HOW STAFF IS TO BE TREATED DURING AN INVESTIGATION.

CORRECTIVE ACTION COMPLETION 8/8/16:

AGENCY PROVIDED AUDITOR WITH DISCIPLINARY EXERPTS FROM COLLECTIVE BARGAINING AGREEMENTS. MEA - MANAGEMENT EMPLOYEE ASSOCIATION, MISC - CORRECTIONAL STAFF AND DSA - FOR ALTERNATIVE SENTENCING. NONE OF THE COLLECTIVE BARGAINING AGREEMENTS RESTRICT AGENCY FROM MOVING STAFF FROM POSITIONS THAT HAVE CONTACT WITH INMATES DURING SEX ABUSE INVESTIGATIONS. AGENCY COMPLIES WITH STANDARD PROVISION 115.66(a). AUDITOR HAS DETERMINED THAT AGENCY MEETS STANDARD 115.66.

AGENCY COMPLIES WITH STANDARD PROVISION 115.66(a)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.66

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES THAT RETALIATION AGAINST ANY EMPLOYEE OR INMATE FOR REPORTING OR COOPERATING WITH SEXUAL ABUSE INVESTIGATION IS STRICTLY PROHIBITED. RETALIATION IS A FORM OF EMPLOYEE MISCONDUCT. ANY EVIDENCE OF RETALIATION SHALL BE CONSIDERED A SEPARATE VIOLATION OF PREA POLICY DD-69. THE DIVISION COMMANDER IS IDENTIFIED AS THE DESIGNATED STAFF MEMBER WITH MONITORING RETALIATION.

- b) PREA POLICY DD-69 MANDATES PROTECTION MEASURES SHALL INCLUDE, HOUSING CHANGES FOR INMATE VICTIMS OR ABUSERS, REMOVAL OF ALLEGED STAFF OR INMATE ABUSERS FROM CONTACT WITH VICTIMS, AND EMOTIONAL SUPPORT SERVICES FOR INMATES OR STAFF THAT FEAR RETALIATION FOR REPORTING SEXUAL ABUSE OR SEXUAL HARASSMENT OR FOR COOPERATING WITH INVESTIGATIONS. INTERVIEW WITH AGENCY HEAD DESIGNEE, FACILITY COMMANDER WHO IS ALSO RETALIATION MONITOR AND INMATES WHO REPORTED SEXUAL ABUSE ALL INDICATE MULTIPLE MEASURES TO PROTECT INMATES FROM ABUSERS WHICH INCLUDE HOUSING TRANSFERS, FACILITY TRANSFERS, REMOVAL OF STAFF FROM VICTIM HOUSING AREAS PENDING INVESTIGATION AND PROVIDING EMOTIONAL SUPPORT FOR INMATES AND STAFF WHO FEAR RELALIATION FOR REPORTING SEXUAL ABUSE OR COOPERATING WITH INVESTIGATIONS.
- c) PREA POLICY DD-69 MANDATES THE FACILITY COMMANDER SHALL ENSURE THAT THE CONDUCT AND TREATMENT OF INMATES OR STAFF THAT HAVE REPORTED SEXUAL ABUSE OR COOPERATED WITH THE INVESTIGATION IS MONITORED FOR CHANGES THAT MAY SUGGEST POSSIBLE RETALIATION FOR AT LEAST NINETY (90) DAYS FOLLOWING THEIR REPORT OR COOPERATION. IF NECESSARY, THE FACILITY COMMANDER SHALL ACT PROMPTLY TO REMEDY ANY SUCH RETALIATION. ITEMS MONITORED WILL INCLUDE INMATE DISCIPLINARY REPORTS, HOUSING OR PROGRAM CHANGES, NEGATIVE PERFORMANCE REVIEW AND REASSIGNMENTS OF STAFF. MONITORING SHALL CONTINUE BEYOND THE NINETY (90) DAYS IF THE INITIAL MONITORING INDICATES A CONTINUING NEED. INTERIVEW WITH RETALIATION MONITOR INDICATES MONTORING IS INITIATED FOR THE 1ST 90 DAYS AND EXTENDED SHOULD THE NEED ARISE AS VERIFIED THROUGH MEDICAL AND/OR MENTAL HEALTH PRACTITIONERS. MEDICAL AND MENTAL HEALTH PRACTITIONERS WILL ASSIST WITH MONITORING REFERRALS SHOULD THE VICTIM BE RELEASED FROM CUSTODY.
- d) PREA POLICY DD-69 MANDATES THAT IN THE CASE OF INMATES, SUCH MONITORING SHALL ALSO INCLUDE PERIODIC CHECKS. INTERVIEW WITH RETALIATION MONITOR INDICATES THE FACILITY LIEUTENANT IS THE INITIAL CONTACT PERSON WHO CONDUCTS FACE TO FACE MONITORING AND COORDINATES FINDINGS WITH THE RETALIATION MONITOR. DURING ON-SITE FACILITY REVIEW AND THROUGH INTERVIEWS WITH INMATES, CONTINUED MONITORING IS ONGOING WITH INMATES WHO ALLEGE SEXUAL ABUSE/HARASSMENT EVEN AFTER THE INVESTIGATIVE PROCESS BY USE OF DVSAC AND STAFF. FACILITY LIEUTENANT IS CONTINUALLY MADE AWARE OF MONITORING EFFORTS. IN ADDITION, STAFF CONTINUALLY UPDATE THE JMS CLASSIFICATION SYSTEM WITH REGARDS TO CONTACTS.
- e) PREA POLICY DD-69 PROHIBITS RETALIATION AGAINST ANY EMPLOYEE, MEDICAL OR MENTAL HEALTH STAFF, CIVILIAN STAFF, VOLUNTEER, CONTRACTOR OR INMATE FOR REPORTING OR COOPERATING WITH SEXUAL ABUSE INVESTIGATION.
- f) 115.67(f) – N/A – STANDARD PROVISION IS NOT APPLICABLE TO AGENCY/FACILITY PER DOJ

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.67

Standard 115.68 Post-allegation protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) CORRECTIONS DIVISION DIRECTIVE 38 – ADMINISTRATIVE SEGREGATION – 1053 MANDATES INMATES AT HIGH RISK FOR SEXUAL VICTIMIZATION SHALL NOT BE PLACED IN INVOLUNTARY SEGREGATED HOUSING UNLESS AN ASSESSMENT OF ALL AVAILABLE ALTERNATIVES HAS BEEN MADE, AND A DETERMINATION HAS BEEN MADE THAT THERE IS NO AVAILABLE ALTERNATIVE MEANS OF SEPARATION FROM LIKELY ABUSERS. IF AN

ASSESSMENT CANNOT BE CONDUCTED IMMEDIATELY, THE INMATE MAY BE PLACED IN INVOLUNTARILY SEGREGATED HOUSING FOR LESS THAN 24 HOURS WHILE COMPLETING THE ASSESSMENT. INMATES PLACED IN SEGREGATED HOUSING FOR THIS PURPOSE SHALL HAVE ACCESS TO PROGRAMS, PRIVILEGES, EDUCATION, AND WORK OPPORTUNITIES. IF THE INMATE IS RESTRICTED ACCESS TO PROGRAMS, PRIVILEGES, EDUCATION, OR WORK OPPORTUNITIES, THE FOLLOWING WILL BE DOCUMENTED IN A JAIL INCIDENT REPORT:

1. THE OPPORTUNITIES THAT HAVE BEEN LIMITED;
2. THE DURATION OF THE LIMITATION; AND
3. THE REASONS FOR SUCH LIMITATIONS.

INMATES SHALL BE ASSIGNED INVOLUNTARY SEGREGATED HOUSING ONLY UNTIL AN ALTERNATIVE MEANS OF SEPARATION FROM LIKELY ABUSERS CAN BE ARRANGED, AND SUCH AN ASSIGNMENT SHALL NOT ORDINARILY EXCEED A PERIOD OF 30 DAYS. IF AN INVOLUNTARY SEGREGATED HOUSING ASSIGNMENT IS MADE PURSUANT TO SECTION (3), THE FOLLOWING WILL BE CLEARLY DOCUMENTED IN THE CLASSIFICATION PORTION OF JMS:

1. THE BASIS FOR CONCERN FOR THE INMATE'S SAFETY; AND
2. THE REASON WHY NO ALTERNATIVE MEANS OF SEPARATION CAN BE ARRANGED.

EVERY 30 DAYS, CLASSIFICATION SHALL AFFORD EACH SUCH INMATE A REVIEW TO DETERMINE WHETHER THERE IS A CONTINUING NEED FOR SEPARATION FROM THE GENERAL POPULATION. AGENCY REPORTS THAT OVER THE PAST 12 MONTHS THERE HAVE BEEN NO INMATES PLACED IN ADMINISTRATIVE SEGREGATION WHO HAVE ALLEGED SEXUAL ABUSE. INTERVIEWS WITH FACILITY COMMANDER, STAFF WHO SUPERVISOR INMATES IN SEGREGATED HOUSING AND INMATES IN SEGREGATED HOUSING WHO SUFFERED SEXUAL ABUSE INDICATE THEY ARE PROVIDED PROGRAMMING AS INDICATED BY THEIR CLASSIFICATION STATUS PRIOR TO BEING TEMPORARILY PLACED IN INVOLUNTARY SEGREGATED HOUSING FOR THEIR SAFETY. REVIEW OF JMS SYSTEM DOCUMENTATION INDICATES CONSTANT MONITORING OF THESE INMATES.

AUDITOR DETERMINES AGENCY MEETS STANDARD 115.68

Standard 115.71 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) AGENCY CONDUCTS BOTH ADMINISTRATIVE AND CRIMINAL SEX ABUSE INVESTIGATIONS. PREA POLICY 2-1 OUTLINES THAT PROCESS AS IT RELATES TO PREA. INTERVIEW WITH INVESTIGATIVE STAFF INDICATE 14 INVESTIGATORS ARE ASSIGNED, TRAINED AND CERTIFIED TO CONDUCT INVESTIGATIONS IN A CORRECTIONAL SETTING. REVIEW OF THE 10 ALLEGATIONS OF SEXUAL ABUSE AND SEXUAL HARASSMENT WHICH OCCURRED OVER THE PAST 12 MONTHS DETERMINES ALL 10 WERE INVESTIGATED PROMPTLY BY INVESTIGATORS WHO ARE CERTIFIED IN THE INVESTIGATIONS OF SEXUAL ABUSE CASES IN A CORRECTIONAL SETTING THROUGH NIC.
- b) PREA POLICY 2-1 MANDATES IN ADDITION TO GENERAL TRAINING PROVIDED TO ALL EMPLOYEES PURSUANT TO (§115.31), NEVADA COUNTY CORRECTIONS DIVISION SHALL ENSURE THAT, TO THE EXTENT THAT NEVADA COUNTY CORRECTIONS DIVISION CONDUCTS SEXUAL ABUSE INVESTIGATIONS, INVESTIGATORS WILL RECEIVE TRAINING IN CONDUCTING INVESTIGATIONS IN A CONFINEMENT SETTING. SPECIALIZED TRAINING SHALL INCLUDE TECHNIQUES FOR INTERVIEWING SEXUAL ABUSE VICTIMS, PROPER USE OF MIRANDA AND GARRITY WARNINGS, SEXUAL ABUSE EVIDENCE COLLECTION IN CONFINEMENT SETTINGS, AND THE CRITERIA AND EVIDENCE REQUIRED TO SUBSTANTIATE A CASE FOR ADMINISTRATIVE ACTION OR PROSECUTION REFERRAL. THE NEVADA COUNTY CORRECTIONS DIVISION SHALL MAINTAIN DOCUMENTATION THAT INVESTIGATORS

HAVE COMPLETED THE REQUIRED SPECIALIZED TRAINING IN CONDUCTING SEXUAL ABUSE INVESTIGATIONS. AGENCY EMPLOYS 14 INVESTIGATORS TRAINED IN SEXUAL ABUSE INVESTIGATION IN A CONFINEMENT SETTING THROUGH NCIC. AGENCY PROVIDED AUDITOR WITH TRAINING CERTIFICATION FOR ALL 14 INVESTIGATORS WHICH MEETS THE SPECIAL TRAINING REQUIREMENT OUTLINED IN STANDARD PROVISION 115.71(b).

- c) GENERAL ORDER 17, CITIZEN PERSONNEL COMPLIANTS/INTERNAL AFFAIRS INVESTIGATIONS POLICY OUTLINES INVESTIGATIVE PROCEDURES FOR ALL INVESTIGATIONS WITH REGARDS TO GATHERING AND PRESERVING DIRECT & CIRCUMSTANTIAL EVIDENCE, PHYSICAL AND DNA EVIDENCE, ELECTRONIC MONITORING DATA AND INTERVIEWING ALLEGED VICTIMS, SUSPECTED PERPETRATORS AND WITNESSES. THIS INCLUDES THE REVIEW OF PRIOR COMPLAINTS AND REPORTS OF SEXUAL ABUSE INVOLVING THE SUSPECTED PERPETRATOR. INTERVIEW WITH INVESTIGATIVE STAFF INDICATE THEY COLLECT EVIDENCE AS TRAINED THROUGH THEIR AGENCY'S INVESTIGATOR TRAINING AND THE NIC TRAINING.
- d) PREA POLICY DD-69 & GENERAL ORDER 17 MANDATES THAT WHEN THE QUALITY OF EVIDENCE APPEARS TO SUPPORT CRIMINAL PROSECUTION, THE AGENCY SHALL CONDUCT COMPELLED INTERVIEWS ONLY AFTER CONSULTING WITH PROSECUTORS AS TO WHETHER COMPELLED INTERVIEWS MAY BE AN OBSTACLE FOR SUBSEQUENT CRIMINAL PROSECUTION. INTERVIEW WITH INVESTIGATIVE STAFF INDICATES PROSECUTION IS CONTACTED PRIOR TO CONDUCTING ANY COMPELLED INTERVIEWS.
- e) PREA POLICY DD-69 MANDATES THE CREDIBILITY OF AN ALLEGED VICTIM, SUSPECT, OR WITNESS SHALL BE ASSESSED ON AN INDIVIDUAL BASIS AND SHALL NOT BE DETERMINED BY THE PERSON'S STATUS AS INMATE OR STAFF. NO AGENCY SHALL REQUIRE AN INMATE WHO ALLEGES SEXUAL ABUSE TO SUBMIT TO A POLYGRAPH EXAMINATION OR OTHER TRUTH-TELLING DEVICE AS A CONDITION FOR PROCEEDING WITH THE INVESTIGATION OF SUCH AN ALLEGATION. INTERVIEW WITH INVESTIGATIVE STAFF INDICATES CREDIBILITY OF ALLEGED VICTIM, SUSPECT OR WITNESS IS DETERMINED BY WAY OF THE INVESTIGATIVE PROCESS. NO PRECONCEIVED CREDIBILITY DECISION IS MADE. WITNESSES, VICTIM AND SUSPECT'S STATEMENTS ARE DETERMINED TO BE CREDIBLE UNLESS THE INVESTIGATION PROCESS PROVES OTHERWISE.
- f) GENERAL ORDER 17, CITIZEN PERSONNEL COMPLIANTS/INTERNAL AFFAIRS INVESTIGATIONS POLICY MANDATES ADMINISTRATIVE INVESTIGATION SHALL BE DOCUMENTED IN WRITTEN REPORTS WHICH INCLUDES BUT IS NOT LIMITED TO PHYSICAL AND TESTIMONIAL EVIDENCE, INVESTIGATIVE FACTS AND FINDINGS. PREA POLICY DD-69 MANDATES WRITTEN REPORTS SHALL INCLUDE THE REASONING BEHIND CREDIBILITY ASSESSMENTS. PREA POLICY DD-69 MANDATES EFFORTS BY INVESTIGATORS TO DETERMINE WHETHER STAFF ACTIONS OR FAILURES TO ACT CONTRIBUTED TO THE ABUSE. INTERVIEW WITH INVESTIGATIVE STAFF INDICATES THE INVESTIGATOR SHALL INCLUDE AN EFFORT TO DETERMIN WHETHER STAFF ACTIONS OR FAILURES TO ACT CONTRIBUTED TO ANY SEXUAL ABUSE ALLEGATION. ALL FINDINGS ARE DOCUMENTED IN THE INVESTIGATIVE REPORT.
- g) GENERAL ORDER 17, CITIZEN PERSONNEL COMPLIANTS/INTERNAL AFFAIRS INVESTIGATIONS POLICY MANDATES ADMINISTRATIVE INVESTIGATION SHALL BE DOCUMENTED IN WRITTEN REPORTS WHICH INCLUDES BUT IS NOT LIMITED TO PHYSICAL AND TESTIMONIAL EVIDENCE, INVESTIGATIVE FACTS AND FINDINGS. AGENCY DID NOT PROVIDE AUDITOR WITH POLICY DIRECTIVE WHICH MANDATES CRIMINAL INVESTIGATIONS TO BE DOCUMENTED IN WRITTEN REPORTS. INTERVIEW WITH INVESTIGATIVE STAFF DETERMINES BOTH ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS ARE DOCUMENTED IN WRITTEN REPORTS, WHICH PROVIDES FOR PHYSICAL, TESTIMONIAL EVIDENCE, INVESTIGATIVE FACTS AND FINDINGS.
- h) AGENCY DID NOT PROVIDE AUDITOR WITH POLICY DIRECTIVE THAT MANDATES REFERRAL OF SUBSTANTIATED ALLEGATIONS OF CONDUCT THAT APPEARS TO BE CRIMINAL FOR PROSECUTION. AGENCY REPORTS ONE SUBSUBSTANTIATED ALLEGATIONS OF CONDUCT THAT APPEAR TO BE CRIMINAL THAT WAS REFERRED FOR PROSECUTION SINCE AUGUST 20, 2012. INTERVIEW WITH INVESTIGATIVE STAFF INDICATE ALLEGATIONS OF SEXUAL ABUSE THAT APPEAR TO BE CRIMINAL ARE REFERRED TO THE DA OFFICE FOR PROSECUTION.
- i) PREA POLICY DD-69 MANDATES THE AGENCY SHALL RETAIN ALL WRITTEN REPORTS FOR AS LONG AS THE ALLEGED ABUSER IS INCARCERATED OR EMPLOYED BY THE AGENCY, PLUS FIVE (5) YEARS.

- j) PREA POLICY DD-69 MANDATES THE DEPARTURE OF THE ALLEGED ABUSER OR VICTIM FROM EMPLOYMENT OR CONTROL OF THE FACILITY OR AGENCY SHALL NOT PROVIDE A BASIS FOR TERMINATING THE INVESTIGATION. INTERVIEW WITH INVESTIGATIVE STAFF INDICATES SHOULD AN ALLEGED ABUSER OR VICTIM DEPART THE FACILITY DUE TO DEPARTURE FROM EMPLOYMENT, OR FACILITY CONTROL, THE INVESTIGATION CONTINUES TO THE END. SHOULD THE INVESTIGATION APPEAR TO BE CRIMINAL IN NATURE, IT IS REFERRED TO THE DA'S OFFICE FOR PROSECUTION.
- k) N/A – STANDARD PROVISION IS NOT APPLICABLE TO AGENCY/FACILITY PER DOJ.
- l) N/A – AGENCY CONDUCTS ITS OWN ADMINISTRATIVE AND CRIMINAL SEXUAL ABUSE INVESTIGATIONS

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.71 AS STANDARD PROVISIONS 115.71(g) AND 115.71(h) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND PREA POLICY DD-69 AND/OR GENERAL ORDER 17, CITIZEN PERSONNEL COMPLAINTS/INTERNAL AFFAIRS INVESTIGATIONS POLICY TO INCLUDE NARRATIVE THAT STATES "CRIMINAL INVESTIGATIONS SHALL BE DOCUMENTED IN WRITTEN REPORTS".
2. AGENCY TO AMEND PREA POLICY DD-69 AND/OR GENERAL ORDER 17, CITIZEN PERSONNEL COMPLAINTS/INTERNAL AFFAIRS INVESTIGATIONS POLICY TO INCLUDE NARRATIVE THAT MANDATES "SUBSTANTIATED ALLEGATIONS OF CONDUCT THAT APPEARS TO BE CRIMINAL WILL BE REFERRED TO THE DISTRICT ATTORNEY'S OFFICE FOR PROSECUTION."

CORRECTIVE ACTION 8/6/16:

1. AGENCY AMENDED PREA POLICY DD-69 TO MANDATE CRIMINAL INVESTIGATIONS SHALL BE DOCUMENTED IN WRITTEN REPORTS. AGENCY COMPLIES WITH STANDARD PROVISION 115.71(g)
2. AGENCY AMENDED PREA POLICY DD-69 TO MANDATE SUBSTANTIAL ALLEGATIONS OF CONDUCT THAT APPEARS TO BE CRIMINAL SHALL BE REFERRED TO THE DISTRICT ATTORNEY'S OFFICE FOR PRESECUTION. AGENCY COMPLIES WITH STANDARD PROVISION 115.71(h).

AGENCY COMPLIES WITH STANDARD PROVISIONS 115.71(g) & 115.71(h).

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.71.

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES NO HIGHER STANDARD SHALL BE IMPOSED THAN A PREPONDERANCE OF THE EVIDENCE IN DETERMINING WHETHER THE ALLEGATIONS OF SEXUAL ABUSE OR SEXUAL HARASSMENT ARE SUBSTANTIATED. WHICH IS VERIFIED THROUGH INTERVIEW WITH INVESTIGATIVE STAFF.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.72

Standard 115.73 Reporting to inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

a) PREA POLICY DD-69 FOLLOWING AN INVESTIGATION INTO AN INMATE'S ALLEGATION THAT THEY SUFFERED SEXUAL ABUSE IN A SHERIFF'S OFFICE FACILITY, THE INMATE SHALL BE INFORMED AS TO WHETHER THE ALLEGATION HAS BEEN DETERMINED TO BE SUBSTANTIATED, UNSUBSTANTIATED, OR UNFOUNDED. AGENCY REPORTS THERE HAS BEEN 1 CRIMINAL AND 9 ADMINISTRATIVE INVESTIGATIONS OF ALLEGED INMATE SEXUAL ABUSE COMPLETED BY AGENCY/FACILITY OVER PAST 12 MONTHS. INTERVIEW WITH FACILITY COMMANDER INDICATES VICTIMS ARE NOTIFIED IN WRITING AS TO THE OUTCOME OF THE INVESTIGATION. INVESTIGATIVE STAFF INDICATE THEY ARE NOT AWARE OF ANY VICTIM NOTIFICATION. REVIEW OF ALL 10 ALLEGATIONS OF SEXUAL ABUSE/HARASSMENT WHICH OCCURRED OVER THE PAST 12 MONTHS, IT WAS DETERMINED THAT ONLY 5 CASES WERE ALLEGATIONS OF SEXUAL ABUSE. REVIEW INDICATED THAT ONLY THE VICTIM OF THE 1 CRIMINAL INVESTIGATION WAS PROVIDED NOTIFICATION AS TO THE OUTCOME OF THE INVESTIGATION.

b) N/A - AGENCY IS RESPONSIBLE FOR BOTH ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS

c) PREA POLICY DD-69 MANDATES FOLLOWING AN INMATE'S ALLEGATION THAT A STAFF MEMBER HAS COMMITTED SEXUAL ABUSE, THE INMATE SHALL BE INFORMED WHENEVER ANY OF THE FOLLOWING OCCUR:

1. THE STAFF MEMBER IS NO LONGER POSTED WITHIN THE INMATE'S HOUSING UNIT;
2. THE STAFF MEMBER IS NO LONGER EMPLOYED BY THE NEVADA COUNTY SHERIFF'S OFFICE;
3. THE STAFF MEMBER HAS BEEN INDICTED ON A CHARGE RELATED TO SEXUAL ABUSE WITHIN THE FACILITY;
4. THE STAFF MEMBER HAS BEEN CONVICTED ON A CHARGE RELATED TO SEXUAL ABUSE WITHIN THE FACILITY;
5. THE REQUIREMENT TO INFORM THE INMATE SHALL NOT APPLY TO ALLEGATIONS THAT HAVE BEEN DETERMINED TO BE UNFOUNDED.

AGENCY REPORTS NO SUBSTANTIATED OR UNSUBSTANTIATED COMPLAINT OF SEXUAL ABUSE COMMITTED BY AS STAFF MEMBER AGAINST AN INMATE IN AN AGENCY FACILITY IN PAST 12 MONTHS.

d) PREA POLICY DD-69 MANDATES FOLLOWING AN INMATE'S ALLEGATION THAT HE OR SHE HAS BEEN SEXUALLY ABUSED BY ANOTHER INMATE, THE INMATE SHALL BE INFORMED WHENEVER ANY OF THE FOLLOWING OCCUR:

1. WHEN IT IS LEARNED THAT THE ALLEGED ABUSER HAS BEEN INDICTED ON A CHARGE RELATED TO SEXUAL ABUSE WITH THE FACILITY; OR
2. WHEN IT IS LEARNED THE ALLEGED ABUSER HAS BEEN CONVICTED ON A CHARGE RELATED TO SEXUAL ABUSE WITHIN THE FACILITY.

REVIEW OF ALL 10 ALLEGATIONS OF SEXUAL ABUSE/HARASSMENT WHICH OCCURRED OVER THE PAST 12 MONTHS, IT WAS DETERMINED THAT ONLY 5 CASES WERE ALLEGATIONS OF SEXUAL ABUSE. REVIEW INDICATED THAT ONLY THE VICTIM OF THE 1 CRIMINAL INVESTIGATION AND 1 ADMINISTRATIVE INVESTIGATION WERE PROVIDED NOTIFICATION AS TO THE OUTCOME OF THE INVESTIGATION.

e) PREA POLICY DD-69 MANDATES ALL NOTIFICATIONS OR ATTEMPTED NOTIFICATIONS TO INMATES SHALL BE DOCUMENTED. AGENCY REPORTS ONE NOTIFICATIONS PROVIDED TO INMATES DESCRIBED UNDER THIS STANDARD PROVISION FOR THE PAST 12 MONTHS. AGENCY PROVIDED 2 DOCUMENTED NOTIFICATIONS OUT OF THE 5 ALLEGATIONS OF SEXUAL ABUSE.

f) N/A – STANDARD PROVISION 115.73(f) IS NOT APPLICABLE TO AGENCY/FACILITY PER DOJ.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.73 AS STANDARD PROVISIONS 115.73(a) AND 115.73(d) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO PROVIDE AUDITOR WITH COPIES OF THE WRITTEN NOTIFICATIONS OF THE OUTCOME OF THE INVESTIGATION, PROVIDED TO THE INMATES WHO SUFFERED SEXUAL ABUSE OVER THE PAST 12 MONTHS. AGENCY HAS PROVIDED AUDITOR WITH 2 AND THERE ARE 3 NOTIFICATIONS WHICH HAVE NOT BEEN PROVIDED TO DATE.

CORRECTIVE ACTION 8/6/16:

AGENCY PROVIDED AUDITOR WITH 4 REMAINING WRITTEN NOTIFICATIONS TO INMATES WHO'S SEXUAL ABUSE INVESTIGATIONS HAVE BEEN CONDUCTED AND COMPLETED. 3 OF THE 4 INMATES HAVE LEFT THE FACILITY AND AGENCY PROVIDED VERIFICATION NOTIFICATIONS WERE MAILED TO THE LAST KNOWN ADDRESS.

AGENCY COMPLIES WITH STANDARD PROVISIONS 115.73(a) AND 115.73(d).

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.73

Standard 115.76 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
-
- a) PREA POLICY DD-69 MANDATES EMPLOYEES SHALL BE SUBJECT TO DISCIPLINARY SANCTIONS UP TO AND INCLUDING TERMINATION FOR VIOLATING THE AGENCY SEXUAL ABUSE AOR SEXUAL HARASSMENT POLICY
 - b) PREA POLICY DD-69 MANDATES EMPLOYEES SHALL BE SUBJECT TO DISCIPLINARY SANCTIONS UP TO AND INCLUDING TERMINATION FOR VIOLATING THIS POLICY. TERMINATION SHALL BE THE PRESUMPTIVE DISCIPLINARY SANCTION FOR STAFF WHO HAS ENGAGED IN SEXUAL ABUSE. AGENCY REPORTS THAT IN THE PAST 12 MONTHS NO STAFF FROM FACILITY HAS VIOLATED AGENCY SEXUAL ABUSE OR SEXUAL HARASSMENT POLICIES.
 - c) PREA POLICY DD-69 MANDATES DISCIPLINARY SANCTIONS FOR VIOLATIONS OF AGENCY POLICY RELATING TO SEXUAL ABUSE OR SEXUAL HARASSMENT (OTHER THAN ENGAGING IN SEXUAL ABUSE) SHALL BE COMMENSURATE WITH THE NATURE AND CIRCUMSTANCES OF THE ACTS COMMITTED, THE STAFF MEMBER'S DISCIPLINARY HISTORY, AND THE SANCTIONS IMPOSED FOR COMPARABLE OFFENSES BY OTHER STAFF WITH SIMILAR HISTORIES. AGENCY REPORTS NO DISCIPLINE, SHORT OF TERMINATION OF STAFF FROM THE FACILITY FOR VIOATION OF AGENCY SEXUAL ABUSE OR SEXUAL HARASSMENT POLICY OVER THE PAST 12 MONTHS.
 - d) PREA POLICY DD-69 MANDATES ALL TERMINATION FOR VIOLATIONS OF SEXUAL ABUSE OR SEXUAL MISCONDUCT, OR RESIGNATIONS BY STAFF WHO WOULD HAVE BEEN TERMINATED IF NOT FOR THEIR RESIGNATION, SHALL BE REPORTED TO LAW ENFORCEMENT AGENCIES, UNLESS THE ACTIVITY WAS CLEARLY

NOT CRIMINAL, AND TO ANY RELEVANT LICENSING BODIES. AGENCY REPORTS NO TERMINATION OF STAFF FROM THE FACILITY FOR VIOLATION OF AGENCY SEXUAL ABUSE OR SEXUAL HARASSMENT POLICY OVER THE PAST 12 MONTHS.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.76

Standard 115.77 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 MANDATES ANY CONTRACTOR OR VOLUNTEER WHO ENGAGES IN SEXUAL ABUSE SHALL BE PROHIBITED FROM CONTACT WITH INMATES AND SHALL BE REPORTED TO THE NEVADA COUNTY SHERIFF'S DEPARTMENT, UNLESS THE ACTIVITY CLEARLY WAS NOT CRIMINAL, AND TO OTHER RELEVANT LICENSING BODIES. AGENCY REPORTS NO CONTRACTORS OR VOLUNTEERS HAVE REPORTED TO LAW ENFORCEMENT AGENCIES AND RELEVANT LICENSING BODIES FOR ENGAGING IN SEXUAL ABUSE OF INMATES OVER THE PAST 12 MONTHS.
- b) PREA POLICY DD-69 MANDATES APPROPRIATE REMEDIAL MEASURE SHALL BE TAKEN IN ADDITION TO CONSIDERING WHETHER TO PROHIBIT FURTHER CONTACT WITH INMATES, IN THE CASE ANY OTHER VIOLATION OF THIS POLICY BY A VOLUNTEER OR CONTRACTOR. INTERVIEW WITH FACILITY COMMANDER INDICATES VOLUNTEER OR CONTRACTOR WILL BE PROHIBITED FROM ENTERING THE FACILITY PENDING INVESTIGATION INTO VIOLATION OF AGENCY SEXUAL ABUSE OR SEXUAL HARASSMENT POLICIES.

AUDITOR DETERMINED AGENCY MEETS STANDARD 115.77

Standard 115.78 Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 MANDATES INMATES WHO ARE FOUND GUILTY OF COMMITTING INMATE-ON-INMATE SEXUAL ASSAULT WILL BE PUNISHED TO THE HIGHEST DEGREE IN ACCORDANCE WITH THE NEVADA COUNTY'S CORRECTION DIVISION INMATE DISCIPLINE POLICY, UP TO AND INCLUDING CRIMINAL PROSECUTION. AGENCY REPORT 7 ADMINISTRATIVE OR CRIMINAL FINDINGS OF INMATE-ON-INMATE SEXUAL ABUSE OCCURRING AT THE FACILITY OVER THE PAST 12 MONTHS.
- b) PREA POLICY DD-69 MANDATES SANCTION SHALL BE COMMENSURATE WITH THE NATURE AND CIRCUMSTANCES OF THE ABUSE COMMITTED, THE INMATE'S DISCIPLINARY HISTORY, AND THE SANCTIONS IMPOSED FOR COMPARABLE OFFENSES BY OTHER INMATES WITH SIMILAR HISTORIES. REVIEW OF INVESTIGATIVE REPORTS VERIFIES COMPLIANCE WITH THIS STANDARD PROVISION.

- c) PREA POLICY DD-69 MANDATES AN INMATE'S MENTAL DISABILITIES OR MENTAL ILLNESS SHALL BE CONSIDERED WHEN DETERMINING WHAT TYPE OF DISCIPLINE, IF ANY, SHOULD BE IMPOSED. INTERVIEW WITH FACILITY COMMANDER CORROBORATES POLICY COMPLIANCE BY INDICATING INMATE'S MENTAL DISABILITIES OR MENTAL ILLNESS WILL BE CONSIDERED AS A DETERMINING FACTOR WHEN IMPOSING SANCTIONS.
- d) AGENCY REPORTS THAT THE FACILITY DOES NOT OFFER THERAPY, COUNSELING, OR OTHER INTERVENTIONS DESIGNED TO ADDRESS AND CORRECT THE UNDERLYING REASONS OR MOTIVATIONS FOR ABUSE. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS INDICATE FACILITY OFFERS COUNSELING AND THERAPY IF NOT WITHIN THE FACILITY, OUTSIDE PRACTITIONERS CAN BE REFERRED.
- e) PREA POLICY DD-69 MANDATES AN INMATE MAY BE DISCIPLINED FOR SEXUAL CONTACT WITH STAFF ONLY UPON A FINDING THAT THE STAFF MEMBER DID NOT CONSENT TO SUCH CONTACT.
- f) PREA POLICY DD-69 MANDATES FOR THE PURPOSE OF DISCIPLINARY ACTION, A REPORT OF SEXUAL ABUSE MADE IN GOOD FAITH BASED UPON REASONABLE BELIEF THAT THE ALLEGED CONDUCT OCCURRED SHALL NOT CONSTITUTE FALSELY REPORTING AN INCIDENT OR LYING, EVEN OF THE INVESTIGATION DOES NOT ESTABLISH EVIDENCE SUFFICIENT TO SUBSTANTIATE THE ALLEGATION.
- g) PREA POLICY DD-69 PROHIBITS SEXUAL ACTIVITY BETWEEN ALL INMATES AND WILL DISCIPLINE THEM FOR SUCH ACTIVITY. SEXUAL ACTIVITY BETWEEN INMATES WILL NOT CONSTITUTE SEXUAL ABUSE IF IT IS DETERMINED THAT THE ACTIVITY IS NOT COERCED.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.78

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

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) AGENCY PROVIDED AUDITOR WITH RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION PAGE #314 FROM NEVADA COUNTY DETENTION FACILITY POLICY & PROCEDURE MANUAL IN SUPPORT OF THIS STANDARD. THE PAGE INDICATES CMFG WILL WORK CLOSELY WITH ADMINISTRATION AND STAFF IN SEX ABUSE PREVENTION, DETECTION AND TIMELY FOLLOWUP. CMFG WILL SCREEN INCOMING DETAINEES FOR RISK AND HISTORY OF SEXUAL VICTIMIZATION AT INTAKE, 14 DAY HEALTH INVENTORY, 6 MONTH PHYSICAL AND ANNUAL PHYSICAL EXAMINATIONS. PREA POLICY 2-1 DOES NOT ADDRESS BOOKING OR INTAKE SCREENING MENTAL HEALTH REFERRALS. AGENCY REPORTS 100% OF INMATES WERE REFERRED TO MEDICAL OR MENTAL HEALTH PRACTITIONER WITHIN 14 DAYS OF INTAKE SCREENING OVER THE PAST 12 MONTHS. REVIEW OF A RANDOM SAMPLE OF SCREENING FILES INDICATED 26 CASES IDENTIFIED INMATES WHO DISCLOSED PRIOR SEXUAL VICTIMIZATION DURING SCREENING. ALL WERE OFFERED FOLLOWUP MEETING WITH MENTAL HEALTH PRACTITIONERS AND WERE REFERRED DURING INTAKE 22 INMATES DECLINED TO SPEAK WITH MENTAL HEALTH PRACTITIONERS. THE REMAINING 4 CASES WHO WISHED TO SPEAK WITH MENTAL HEALTH WERE SEEN BY MENTAL HEALTH PRACTITIONER WITHIN 4 DAYS OF INTAKE. INTERVIEW WITH RISK SCREENING STAFF INDICATES INMATES ARE SEEN WITHIN 30 DAYS OF INTAKE WHEN REFERRED TO MENTAL HEALTH. INMATES WHO DISCLOSED SEXUAL VICTIMIZATION AT RISK SCREENING INDICATE THEY WERE BOTH SEEN BY MENTAL HEALTH WITHIN 1 WEEK OF INTAKE. BOTH WERE REFERRED TO PSYCHIATRIST FOR FOLLOWUP CARE.
 - b) N/A – FACILITY IS A COUNTY JAIL, NOT A PRISON. STANDARD DOES NOT APPLY TO THIS AGENCY.

- c) AGENCY PROVIDED AUDITOR WITH RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION PAGE #314 FROM NEVADA COUNTY DETENTION FACILITY POLICY & PROCEDURE MANUAL IN SUPPORT OF THIS STANDARD. THE PAGE INDICATES CMFG WILL WORK CLOSELY WITH ADMINISTRATION AND STAFF IN SEX ABUSE PREVENTION, DETECTION AND TIMELY FOLLOWUP. CMFG WILL SCREEN INCOMING DETAINEES FOR RISK AND HISTORY OF SEXUAL VICTIMIZATION AT INTAKE, 14 DAY HEALTH INVENTORY, 6 MONTH PHYSICAL AND ANNUAL PHYSICAL EXAMINATIONS. PREA POLICY 2-1 DOES NOT ADDRESS BOOKING OR INTAKE SCREENING MENTAL HEALTH REFERRALS. AGENCY REPORTS 100% OF INMATES WERE REFERRED TO MEDICAL OR MENTAL HEALTH PRACTITIONER WITHIN 14 DAYS OF INTAKE SCREENING OVER THE PAST 12 MONTHS. REVIEW OF A RANDOM SAMPLE OF SCREENING FILES INDICATED 26 CASES IDENTIFIED INMATES WHO DISCLOSED PRIOR SEXUAL VICTIMIZATION DURING SCREENING. ALL WERE OFFERED FOLLOWUP MEETING WITH MENTAL HEALTH PRACTITIONERS AND WERE REFERRED DURING INTAKE 22 INMATES DECLINED TO SPEAK WITH MENTAL HEALTH PRACTITIONERS. THE REMAINING 4 CASES WHO WISHED TO SPEAK WITH MENTAL HEALTH WERE SEEN BY MENTAL HEALTH PRACTITIONER WITHIN 4 DAYS OF INTAKE. INTERVIEW WITH RISK SCREENING STAFF INDICATES INMATES ARE SEEN WITHIN 30 DAYS OF INTAKE WHEN REFERRED TO MENTAL HEALTH. INMATES WHO DISCLOSED SEXUAL VICTIMIZATION AT RISK SCREENING INDICATE THEY WERE BOTH SEEN BY MENTAL HEALTH WITHIN 1 WEEK OF INTAKE. BOTH WERE REFERRED TO PSYCHIATRIST FOR FOLLOWUP CARE.
- d) PREA POLICY DD-69 MANDATES ALL INFORMATION RECEIVED IN RESPONSE TO THE INMATES RISK ASSESSMENT QUESTIONNAIRE IS TO BE TREATED AS CONFIDENTIAL INFORMATION AND SHALL ONLY BE REPORTED TO DESIGNATED SUPERVISORS, CLASSIFICATION STAFF, AND MEDICAL/MENTAL HEALTH STAFF. INTERVIEW WITH MENTAL HEALTH PRACTITIONERS AND CUSTODY STAFF INDICATE ALL MEDICAL AND MENTAL HEALTH RECORDS ARE ACCESSED ONLY THROUGH MEDICAL AND MENTAL HEALTH STAFF. INFORMATION MAY BE PROVIDED TO CLASSIFICATION STAFF ON A NEED TO KNOW BASIS.
- e) RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION FROM NEVADA COUNTY DETENTION FACILITY POLICY & PROCEDURE MANUAL MANDATES MEDICAL AND MENTAL HEALTH PRACTITIONERS OBTAIN INFORMED CONSENT FROM INMATES BEFORE REPORTING INFORMATION ABOUT PRIOR SEXUAL VICTIMIZATION THAT DID NOT OCCUR IN AN INSTITUTIONAL SETTING UNLESS THE INMATE IS UNDER THE AGE OF 18. COPY OF A BLANK CMFG (CALIFORNIA FORENSIC MEDICAL GROUP) HIPPA RELEASE OF INFORMATION FORM WAS PROVIDED TO AUDITOR WHICH FAILS TO PROVIDE INFORMED CONSENT NARRATIVE AS REQUIRED BY STANDARD PROVISION 115.81(e). MEDICAL AND MENTAL HEALTH STAFF INDICATE THEY OBTAIN INFORMED CONSENT FORM WHICH IS SPECIFIC TO HIPPA. FORM DOES NOT PROVIDE CONSENT AGREEMENT FROM INMATE WHICH WOULD ALLOW PRACTITIONER TO REPORT INFORMATION ABOUT PRIOR SEXUAL VICTIMIZATION THAT DID NOT OCCUR IN AN INSTITUTIONAL SETTING TO AGENCY AS REQUIRED BY THIS STANDARD PROVISION.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.81 AS STANDARD PROVISIONS 115.81(e) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO CREATE AND PROVIDE A FORM WHICH INFORMS INMATES OF THE MENTAL HEALTH AND MEDICAL PRACTITIONERS DUTY TO REPORT AND THE LIMITATIONS OF CONFIDENTIALITY AT THE INITIATION OF SERVICES. THERE SHOULD BE A SIGNATURE AND DATE AREA FOR BOTH STAFF AND INMATE.
2. AGENCY TO AMEND CMFG AND/OR PREA POLICY DD-69 MANDATING THE USE OF THE ABOVE CONSENT FORM BY MEDICAL AND MENTAL HEALTH STAFF PRIOR TO THE INITIATION OF SERVICES.

CORRECTIVE ACTION COMPLETION 10/11/16:

AGENCY PROVIDED AUDITOR WITH ACKNOWLEDGEMENT OF MANDATORY REPORTING AND CONSENT FORM FROM THE CMGC MEDICAL GROUP WHICH PROVIDES MEDICAL AND MENTAL HEALTH SERVICES FOR THE AGENCY. THE FORM PROVIDES BOTH LIMITS OF CONFIDENTIALITY AND DUTY TO REPORT INFORMATION TO BE PROVIDED TO INMATES PRIOR TO THE INITIATION OF SERVICES AND THE INMATES MUST SIGN THE FORM TO ACKNOWLEDGE RECEIPT OF THIS INFORMATION IN ACCORDANCE WITH STANDARD PROVISION 115.81(e).

AGENCY AMENDED CMGC POLICY TO MANDATE USE OF THE ABOVE IDENTIFIED CONSENT FORM BY BOTH MENTAL AND MEDICAL HEALTH STAFF PRIOR TO THE INITIATION OF SERVICES IN ACCORDANCE WITH STANDARD PROVISION 115.81(e).

AGENCY COMPLIES WITH STANDARD PROVISION 115.81(e)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.81

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 IDENTIFIES TIMELY MEDICAL RESPONSE IN THE COORDINATED RESPONSE PROTOCOL:
1. ALL ALLEGATIONS OF SEXUAL ABUSE, INCLUDING THIRD-PARTIES AND ANONYMOUS REPORTS SHALL BE REPORTED TO THE FACILITY COMMANDER OR HIS DESIGNEE.
 2. THE SHIFT SERGEANT OR OIC SHALL NOTIFY DISPATCH (911) AND REQUEST A NEVADA COUNTY SHERIFFS OFFICER TO RESPOND.
 3. IF THE VICTIM ALLEGES HE/SHE WAS INVOLVED WITH OR ASSAULTED BY STAFF, THE FACILITY COMMANDER SHALL ALSO NOTIFY THE INTERNAL AFFAIRS UNIT.
 4. THE INMATE SHALL BE TRANSPORTED TO THE HOSPITAL FOR A FORENSIC EXAMINATION.
 5. IF ANY LIFE-THREATENING INJURIES EXIST, RESPONSE MAY INCLUDE THE NEED TO REQUEST EMERGENCY TRANSPORTATION (I.E., AMBULANCE). WHEN THE CALL IS MADE TO REQUEST AN AMBULANCE, IT IS CRITICAL TO INFORM THE FIRE/RESCUE DISPATCHER THAT THE INJURED INMATE IS A VICTIM OF SEXUAL ASSAULT.
 - a. MEDICAL STAFF SHALL BE COGNIZANT TO MAINTAIN INTACT ANY PHYSICAL EVIDENCE WHICH MAY BE FOUND ON THE VICTIM'S PERSON OR CLOTHING.
 - b. FOLLOW-UP TESTING FOR PREGNANCY, SEXUALLY TRANSMITTED INFECTIONS/DISEASES AND HIV WILL BE OFFERED AS CLINICALLY INDICATED AND WILL BE THE RESPONSIBILITY OF THE HOSPITAL.

AGENCY INDICATES THE NATURE AND SCOPE OF SUCH SERVICES ARE DETERMINED BY MEDICAL AND MENTAL HEALTH PRACTITIONERS ACCORDING TO THEIR PROFESSIONAL JUDGEMENT. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS INDICATE VICTIMS OF SEXUAL ABUSE RECEIVE IMMEDIATE EMERGENCY MEDICAL TREATMENT AND CRISIS INTERVENTION SERVICES & PROVIDED TREATMENT DETERMINED BY MEDICAL AND MENTAL HEALTH PRACTITIONERS ACCORDING TO THEIR PROFESSIONAL JUDGEMENT. INTERVIEW WITH INMATES WHO REPORTED A SEXUAL ABUSE INDICATE THEY WERE REFERRED TO MENTAL AND MEDICAL TREATMENT IMMEDIATELY UPON DISCLOSING SEXUAL VICTIMIZATION.

- b) PREA POLICY DD-69 INITIAL RESPONSE AND COORDINATED RESPONSE FAIL TO INCLUDE NARRATIVE PURSUANT TO STANDARD PROVISION 115.82(b) MANDATING 1ST RESPONDERS IMMEDIATELY NOTIFY THE APPROPRIATE MEDICAL AND MENTAL HEALTH PRACTITIONERS IF NO QUALIFIED MEDICAL OR MENTAL HEALTH PRACTITIONERS ARE ON DUTY AT THE TIME A REPORT OF RECENT ABUSE IS MADE. INTERVIEW

WITH SECURITY STAFF INDICATE MENTAL HEALTH AND MEDICAL PRACTITIONERS ARE AVAILABLE 24/7. DURING INTERVIEWS OF 12 RANDOMLY SELECTED CUSTODY STAFF ONLY HALF INCLUDED NOTIFICATION OF MEDICAL AND MENTAL HEALTH WITH THEIR RESPONSE TO THEIR 1ST RESPONDER QUESTIONS FOR ALLEGATION OF SEXUAL ABUSE.

- c) PREA POLICY DD-69 MANDATES AT THE TIME FORENSIC EXAMINATION IS BEING CONDUCTED, HOSPITAL MEDICAL STAFF FROM SUTTER AUBURN FAITH HOSPITAL WILL BE RESPONSIBLE TO CONDUCT AN EXAMINATION OF THE VICTIM AND ALLEGED SUSPECT TO DETERMINE THE PRESENCE OR ABSENCE OF PHYSICAL TRAUMA, AND PERFORM FOLLOW-UP TESTING FOR SEXUALLY TRANSMITTED DISEASES AND PREGNANCY TESTING, AS APPROPRIATE. RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION POLICY MANDATES TIMELY ACCESS TO EMERGENCY CONTRACEPTION FOR INMATE SEXUAL ABUSE VICTIMS WHO ARE FEMALE. INTERVIEWS WITH MEDICAL AND MENTAL HEALTH STAFF INDICATE INMATE VICTIMS OF SEXUAL ABUSE ARE OFFERED TIMELY ACCESS TO EMERGENCY CONTRACEPTION AND STD PROHYLAXIS INITIALLY DURING FORENSIC EXAMINATION AND FOLLOWUP CARE WITH MEDICAL HERE AT THE FACILITY.
- d) RAPE & SEXUAL ASSAULT DETECTION AND PREVENTION POLICY MANDATES TREATMENT SERVICES TO BE PROVIDED TO EVERY SEXUAL ABUSE VICTIM WITHOUT FINANCIAL COST AND REGARDLESS OF WHETHER THE VICTIM NAMES THE ABUSER OR COOPERATE WITH ANY INVESTIGATIONS ARISING OUT OF THE INCIDENT. INTERVIEWS WITH MEDICAL AND MENTAL HEALTH STAFF INDICATE INMATE VICTIMS OF SEXUAL ABUSE ARE PROVIDED TREATMENT SERVICES WITHOUT FINANCIAL COST REGARDLESS WHETHER OR NOT THEY COOPERATE WITH ANY INVESTIGATIONS ARISING OUT OF THE INCIDENT.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.82 AS STANDARD PROVISIONS 115.82(b) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND PREA POLICY DD-69 AND COORDINATED RESPONSE FOR WBCF TO MANDATE 1ST RESPONDERS TO IMMEDIATELY NOTIFY APPROPRIATE MEDICAL AND MENTAL HEALTH PRACTITIONERS IF NO QUALIFIED OR MENTAL HEALTH PRACTITIONERS ARE ON DUTY AT THE TIME A REPORT OF RECENT ABUSE IS MADE.

CORRECTIVE ACTION COMPLETION 8/6/16:

AGENCY AMENDED PREA POLICY DD-69 WHICH INCORPORATES THE COORDINATED RESPONSES FOR BOTH WAYNE BROWN CORRECTIONAL FACILITY AND THE TRUCKEE SUBSTATION LOCKUP FACILITY. THE AMENDMENT PROVIDES MANDATED DIRECTION FOR 1ST RESPONDERS TO IMMEDIATELY NOTIFY APPROPRIATE MEDICAL/MENTAL HEALTH PR actioners IF NO QUALIFIED OR MENTAL HEALTH PRACTITIONERS ARE ON DUTY AT THE TIME AN ALLEGATION OF SEXUAL ABUSE IS MADE.

AGENCY COMPLIES WITH STANDARD PROVISION 115.82(b).

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.82.

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

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
-
- a) PREA POLICY DD-69 AND NEVADA CJ PROCEDURES MANUAL - RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION PROVIDES MANDATE FOR MEDICAL AND MENTAL HEALTH EVALUATION AND TREATMENT TO ALL INMATES WHO HAVE BEEN VICTIMIZED BY SEXUAL ABUSE IN THEIR FACILITIES.
 - b) PREA POLICY DD-69 AND NEVADA CJ PROCEDURES MANUAL - RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION PROVIDES MANDATE FOR MEDICAL AND MENTAL HEALTH EVALUATION AND TREATMENT TO ALL INMATES WHO HAVE BEEN VICTIMIZED BY SEXUAL ABUSE IN THEIR FACILITIES. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS AGREE WITH POLICY AND REFER INMATES TO FOLLOWUP CARE UPON TRANSFER TO OTHER FACILITIES OR DISCHARGE FROM WBCF.
 - c) PREA POLICY DD-69 AND NEVADA CJ PROCEDURES MANUAL - RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION MANDATES THAT CFMG PROVIDES ONGOING MEDICAL AND MENTAL HEALTH SERVICES AND TREATMENT AND POST RELEASE REFERRALS FOR SEXUAL ABUSE VICTIMS AND ABUSERS WILL BE PROVIDED AS DETERMINED APPROPRIATE BY QUALIFIED MEDICAL AND MENTAL HEALTH PRACTITIONERS. FOLLOWING MEDICAL FORENSIC EXAMINATION AT THE HOSPITAL (SUTTER AUBURN FAITH HOSPITAL), ONCE RELEASED BACK TO THE JAIL STAFF AND ARRIVAL AT THE JAIL, ALL VICTIMS OF A SEXUAL ASSAULT SHALL BE REFERRED TO BEHAVIORAL HEALTH FOR AN URGENT SUICIDE RISK ASSESSMENT. MENTAL HEALTH STAFF SHALL EVALUATE THE VICTIM WITHIN FOUR (4) HOURS OF REFERRAL. UNTIL THAT TIME, THE INMATE SHALL BE PLACE UNDER CONSTANT DIRECT SUPERVISION TO ENSURE HE/SHE DOES NOT ATTEMPT TO HURT HIMSELF/HERSELF OR SOMEONE ELSE. BEHAVIORAL HEALTH SHALL BE RESPONSIBLE TO MONITOR VICTIMS FOR SUICIDAL IMPULSES, POST-TRAUMATIC STRESS DISORDER, DEPRESSION, AND OTHER MENTAL HEALTH CONSEQUENCES. THE VICTIM SHALL BE OFFERED CRISIS INTERVENTION COUNSELING, APPROPRIATE TO THE INDIVIDUAL NEEDS OF THE VICTIM. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS INDICATE THEY ARE BOARD CERTIFIED AND PROVIDE HEALTH SERVICES CONSISTENT WITH THE COMMUNITY LEVEL OF CARE. MEDICAL SERVICES WITHIN THE FACILITY ONLY MANAGE LOW LEVEL CARE. ACUTE OR EMERGENCY TREATMENT IS HANDLED AT THE SUTTER AUBURN FAITH HOSPITAL.
 - d) PREA POLICY DD-69 MANDATES MEDICAL STAFF SHALL BE COGNIZANT TO MAINTAIN INTACT ANY PHYSICAL EVIDENCE WHICH MAY BE FOUND ON THE VICTIM'S PERSON OR CLOTHING. FOLLOW-UP TESTING FOR PREGNANCY, SEXUALLY TRANSMITTED INFECTIONS/DISEASES AND HIV WILL BE OFFERED AS CLINICALLY INDICATED AND WILL BE THE RESPONSIBILITY OF THE HOSPITAL. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS INDICATE FEMALE INMATE VICTIMS ARE PROVIDED PREGNANCY TESTS SHOULD SEXUALLY ABUSIVE VAGINAL PENETRATION OCCURRED WHILE INCARCERATED.
 - e) NEVADA CJ PROCEDURES MANUAL - RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION MANDATES THAT IF PREGANCY RESULTS FROM SEXUAL ABUSE, SUCH VICTIMS SHALL RECEIVE TIMELY AND COMPREHENSIVE INFORMATION ABOUT THE TIMELY ACCESS TO ALL LAWFUL PREGNANCY-RELATED MEDICAL SERVICES. INTERVIEW WITH MEDICAL AND MENTAL HEALTH PRACTITIONERS INDICATE FEMALE INMATE VICTIMS ARE PROVIDED PREGNANCY RELATED MEDICAL SERVICES.
 - f) PREA POLICY DD-69 MANDATES HOSPITAL MEDICAL STAFF (SUTTER AUBURN FAITH HOSPITAL) WILL BE RESPONSIBLE TO CONDUCT AN EXAMINATION OF THE VICTIM AND ALLEGED SUSPECT TO DETERMINE THE PRESENCE OR ABSENCE OF PHYSICAL TRAUMA, AND PERFORM FOLLOW-P TESTING FOR SEXUALLY TRANSMITTED DISEASES AND PREGNANCY TESTING, AS APPROPRIATE.

- g) NEVADA CJ PROCEDURES MANUAL - RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION MANDATES TREATMENT SERVICES TO BE PROVIDED TO EVERY SEXUAL ABUSE VICTIM WITHOUT FINANCIAL COST AND REGARDLESS OF WHETHER THE VICTIM NAMES THE ABUSER. POLICY FAILS TO INCLUDE "OR COOPERATE WITH ANY INVESTIGATIONS ARISING OUT OF THE INCIDENT."
- h) N/A – FACILITY IS A COUNTY JAIL AND, THEREFORE, STANDARD PROVISION 115.83(h) IS NOT APPLICABLE TO THIS FACILITY.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.83 AS STANDARD PROVISIONS 115.83(g) IS NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

- 1. AGENCY TO AMEND NEVADA CJ PROCEDURES MANUAL – RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION TO INCLUDE NARRATIVE WHICH STATES TREATMENT SERVICES ARE TO BE PROVIDED TO EVERY SEXUAL ABUSE VICTIM WITHOUT FINANCIAL COST AND REGARDLESS OF WHETHER THE VICTIM NAMES THE ABUSER "OR FAILS TO COOPERATE WITH ANY INVESTIGATION ARISING OUT OF THE INCIDENT."

CORRECTIVE ACTION COMPLETION 10/11/16:

AGENCY AMENDED NEVADA CJ PROCEDURES MANUAL – RAPE AND SEXUAL ASSAULT PREVENTION & DETECTION TO INCLUDE NARRATIVE WHICH STATES TREATMENT SERVICES ARE TO BE PROVIDED TO SEXUAL ABUSE VICTIMS WITHOUT FINANCIAL COST AND REGARDLESS OF WHETHER THE VICTIM NAMES THE ABUSER "OR FAILS TO COOPERATE WITH ANY INVESTIGATION ARISING OUT OF THE INCIDENT."

AGENCY COMPLIES WITH STANDARD PROVISION 115.83(g)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.83

Standard 115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES THE NEVADA COUNTY CORRECTIONS DIVISION SHALL CONDUCT A SEXUAL ABUSE INCIDENT REVIEW AT THE CONCLUSION OF EVERY SEXUAL ABUSE INVESTIGATION, INCLUDING WHEN THE ALLEGATION HAS NOT BEEN SUBSTANTIATED, UNLESS THE ALLEGATION HAS BEEN DETERMINED TO BE UNFOUNDED. AGENCY REPORTS THAT IN THE PAST 12 MONTHS NO INCIDENT REVIEWS WERE CONDUCTED DUE TO LACK OF COMPLETED CRIMINAL OR ADMINISTRATIVE INVESTIGATIONS OF ALLEGED SEXUAL ABUSE. DURING ON-SITE FACILITY REVIEW, AUDITOR WAS PROVIDED 10 COMPLETED INVESTIGATIVE REPORTS OF THOSE 10 REPORTS 9 WERE FOUND TO BE SUBSTANTIATED OR UNSUBSTANTIATED. NONE OF THESE INVESTIGATIONS HAVE HAD A COMPLETED SEXUAL ABUSE INCIDENT REVIEW TO DATE.

- b) PREA POLICY DD-69 MANDATES THAT INCIDENT REVIEWS SHALL ORDINARILY OCCUR WITHIN 30 DAYS OF THE CONCLUSION OF THE INVESTIGATION. AGENCY REPORTS THAT IN THE PAST 12 MONTHS, NO CRIMINAL OR ADMINISTRATIVE INVESTIGATIONS OF ALLEGED SEXUAL ABUSE OCCURRED PROMPTING THE LACK OF INCIDENT REVIEWS. DURING ON-SITE FACILITY REVIEW, AUDITOR WAS PROVIDED 10 COMPLETED INVESTIGATIVE REPORTS OF THOSE 10 REPORTS 9 WERE FOUND TO BE SUBSTANTIATED OR UNSUBSTANTIATED. NONE OF THESE INVESTIGATIONS HAVE HAD A COMPLETED SEXUAL ABUSE INCIDENT REVIEW TO DATE.
- c) PREA POLICY DD-69 IDENTIFIES THE COMPOSITION OF THE INCIDENT REVIEW TEAM AS DIVISION COMMANDER, EXECUTIVE LIEUTENANT, PREA COORDINATOR WITH INPUT FROM LINE SUPERVISORS, INVESTIGATORS, AND MEDICAL OR MENTAL HEALTH PRACTITIONERS. INTERVIEW WITH FACILITY COMMANDER INDICATES THERE IS AN INCIDENT REVIEW TEAM IN PLACE, HOWEVER, NO INCIDENT REVIEWS HAVE BEEN CONDUCTED AS OF YET.
- d) PREA POLICY DD 69 MANDATES THE INCIDENT REVIEW TEAM SHALL:
 - 1. CONSIDER WHETHER THE ALLEGATION OR INVESTIGATION INDICATES A NEED TO CHANGE POLICY OR PRACTICE TO BETTER PREVENT, DETECT, OR RESPOND TO SEXUAL ABUSE;
 - 2. CONSIDER WHETHER THE INCIDENT OR ALLEGATION WAS MOTIVATED BY RACE; ETHNICITY; GENDER IDENTITY; LESBIAN, GAY, BISEXUAL, TRANSGENDER, OR INTERSEX IDENTIFICATION, STATUS, OR PERCEIVED STATUS; OR GANG AFFILIATION; OR WAS MOTIVATED OR OTHERWISE CAUSED BY OTHER GROUP DYNAMICS AT THE FACILITY;
 - 3. EXAMINE THE AREA IN THE FACILITY WHERE THE INCIDENT ALLEGEDLY OCCURRED TO ASSESS WHETHER PHYSICAL BARRIERS IN THE AREA MAY ENABLE ABUSE;
 - 4. ASSESS ADEQUACY OF STAFFING LEVELS IN THE AREA DURING DIFFERENT SHIFTS;
 - 5. ASSESS WHETHER MONITORING TECHNOLOGY SHOULD BE DEPLOYED OR AUGMENTED TO SUPPLEMENT SUPERVISION BY STAFF;
 - 6. PREPARE A REPORT OF ITS FINDINGS AND ANY RECOMMENDATIONS FOR IMPROVEMENT AND SUBMIT SUCH REPORT TO THE FACILITY COMMANDER AND PREA COMPLIANCE MANAGER.

INTERVIEW WITH FACILITY COMMANDER AND PREA COMPLIANCE MANAGER INDICATE REVIEW TEAM WILL CONSIDER ALL CRITERIA IDENTIFIED IN PREA POLICY DD 69 AND PREA STANDARD PROVISION 115.86(d). TO DATE AUDITOR HAS NOT RECEIVED ANY SEXUAL ABUSE INCIDENT REVIEW TEAM REPORTS FOR VERIFICATION.
- e) AGENCY REPORTS THAT IN THE PAST 12 MONTHS, NO CRIMINAL OR ADMINISTRATIVE INVESTIGATIONS OF ALLEGED SEXUAL ABUSE OCCURRED PROMPTING THE LACK OF INCIDENT REVIEWS, ERGO NO RECOMMENDATIONS FOR IMPROVEMENT OR IMPLEMENTATION OF ANY RECOMMENDATIONS. TO DATE AUDITOR HAS NOT RECEIVED ANY SEXUAL ABUSE INCIDENT REVIEW TEAM REPORTS FOR VERIFICATION OF STANDARD PROVISION 115.86(e).

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.86 AS STANDARD PROVISIONS 115.86(a), 115.86(b), 115.86(c), 115.86(d) AND 115.86(e) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

- 1. PROVIDE AUDITOR WITH COPIES OF SEXUAL ABUSE INCIDENT REVIEW REPORTS FOR ALL INVESTIGATIONS THAT WERE FOUND TO BE SUBSTANTIATED OR UNSUBSTANTIATED. ENSURE THE REVIEW TEAM CONSIDER THE 6 CRITERIA OUTLINED IN STANDARD PROVISION 115.86(e).

CORRECTIVE ACTION COMPLETION 9/26/16:

AGENCY REVIEWED THE 9 SUBSTANTIATED OR UNSUBSTANTIATED REPORTS PREVIOUSLY PROVIDED TO AUDITOR AND FOUND THAT ONLY 5 ALLEGATIONS MET THE CRITERIA OF SEXUAL ABUSE. AGENCY PROVIDED

AUDITOR WITH THE 5 COMPLETED INCIDENT REVIEWS. THE INCIDENT REVIEW TEAM INCORPORATED UPPER LEVEL MANAGEMENT AND MET THE CRITERIA OUTLINED IN STANDARD PROVISION 115.86(e).

AGENCY HAS COMPLIED WITH STANDARD PROVISIONS 115.86(a) THROUGH 115.86(e).

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.86

Standard 115.87 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
- a) PREA POLICY DD-69 MANDATES AGENCY COLLECT ACCURATE, UNIFORM DATA FOR EVERY ALLEGATION OF SEXUAL ABUSE SHALL BE COLLECTED USING A STANDARDIZED INSTRUMENT AND SET OF DEFINITIONS. INCIDENT-BASED SEXUAL ABUSE DATA SHALL BE AGGREGATED AT LEAST ANNUALLY AND SHALL 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 DOJ. AUDITOR WAS PROVIDED 2014 & 2015 ANNUAL REPORT. REVIEW OF SHERIFF'S WEBSITE PROVIDED A NON-COMPLIANT VERSION OF AN ANNUAL REPORT WHICH WAS A STATISTICAL DATA TABLE FOR 2014 & 2015. THERE WAS NO INDICATION THAT THE DATA COLLECTED WAS USED TO ASSESS AND IMPROVE EFFECTIVENESS OF SEX ABUSE PREVENTION, DETECTION AND RESPONSE POLICIES, PRACTICES, AND TRAINING. NO IDENTIFICATION OF PROBLEM AREAS, CORRECTIVE ACTION TAKEN BY EACH FACILITY OR THE AGENCY AS A WHOLE. THERE ARE NO SET OF DEFINITIONS AS ARE CALL FOR IN THE MOST RECENT SURVEY OF SEXUAL VIOLENCE ANNUAL FORM CONDUCTED BY THE DEPARTMENT OF JUSTICE.
- b) PREA POLICY DD-69 MANDATES INCIDENT-BASED SEXUAL ABUSE DATA SHALL BE AGGREGATED AT LEAST ANNUALLY. AUDITOR WAS PROVIDED 2014 & 2015 ANNUAL REPORT, WHICH WAS A STATISTICAL AGGREGATED INCIDENT-BASED SEXUAL ABUSE DATA TABLE FOR 2014 & 2015. THIS IS AGENCY'S 1ST PREA AUDIT AND NO PREVIOUS SEXUAL ABUSE DATA HAD BEEN COLLECTED PRIOR TO 2014.
- c) PREA POLICY DD-69 MANDATES AGENCY COLLECT ACCURATE, UNIFORM DATA FOR EVERY ALLEGATION OF SEXUAL ABUSE SHALL BE COLLECTED USING A STANDARDIZED INSTRUMENT AND SET OF DEFINITIONS. INCIDENT-BASED SEXUAL ABUSE DATA SHALL BE AGGREGATED AT LEAST ANNUALLY AND SHALL 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 DOJ. AUDITOR WAS PROVIDED 2014 & 2015 ANNUAL REPORT. REVIEW OF SHERIFF'S WEBSITE PROVIDED A NON-COMPLIANT VERSION OF AN ANNUAL REPORT WHICH WAS A STATISTICAL DATA TABLE FOR 2014 & 2015. THERE WAS NO INDICATION THAT THE DATA COLLECTED WAS USED TO ASSESS AND IMPROVE EFFECTIVENESS OF SEX ABUSE PREVENTION, DETECTION AND RESPONSE POLICIES, PRACTICES, AND TRAINING. NO IDENTIFICATION OF PROBLEM AREAS, CORRECTIVE ACTION TAKEN BY EACH FACILITY OR THE AGENCY AS A WHOLE. THERE ARE NO SET OF DEFINITIONS AS ARE CALL FOR IN THE MOST RECENT SURVEY OF SEXUAL VIOLENCE ANNUAL FORM CONDUCTED BY THE DEPARTMENT OF JUSTICE.
- d) PREA POLICY DD-69 MANDATES ALL DATA COLLECTED SHALL BE MAINTAINED, REVIEWS AS NEEDED FROM ALL AVAILABLE INCIDENT-BASED DOCUMENTS, INCLUDING REPORTS, INVESTIGATION FILES, AND SEXUAL ABUSE INCIDENT REVIEWS. AUDITOR WAS PROVIDED 2014 & 2015 ANNUAL REPORT, WHICH WAS A STATISTICAL AGGREGATED INCIDENT-BASED SEXUAL ABUSE DATA TABLE FOR 2014 & 2015 FROM EACH CORRECTIONAL FACILITY UNDER AGENCY CONTROL.

- e) N/A – STANDARD PROVISION 115.87(e) IS NOT APPLICABLE TO AGENCY. AGENCY REPORTS IT DOES NOT CONTRACT WITH OTHER FACILITIES FOR THE CONFINEMENT OF INMATES.
- f) N/A – STANDARD PROVISION 115.87(e) IS NOT APPLICABLE TO AGENCY. AGENCY REPORTS DOJ HAS NOT REQUESTED AGENCY DATA.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.87 AS STANDARD PROVISIONS 115.87(a) AND 115.87(c) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND 2015 ANNUAL REPORT TO INCLUDE NARRATIVE WHICH VERIFIES AGENCY USED THE DATA COLLECTED TO ASSESS AND IMPROVE EFFECTIVENESS OF SEX ABUSE PREVENTION, DETECTION AND RESPONSE POLICIES, PRACTICES, AND TRAINING. NO IDENTIFICATION OF PROBLEM AREAS, CORRECTIVE ACTION TAKEN BY EACH FACILITY OR THE AGENCY AS A WHOLE.
2. AGENCY TO INCLUDE SET OF DEFINITIONS AS ARE CALLED FOR IN THE MOST RECENT SURVEY OF SEXUAL VIOLENCE ANNUAL FORM CONDUCTED BY THE DEPARTMENT OF JUSTICE.

CORRECTIVE ACTION COMPLETION 9/26/16:

AGENCY POSTED PREA COMPLIANT ANNUAL REPORT FOR 2014 & 2015. ANNUAL REPORT INCLUDES NARRATIVE WHICH INDICATES DATA COLLECTION IS UTILIZED TO PROVIDE SEXUAL SAFETY TO THE INMATES HOUSED IN THEIR FACILITIES IN ACCORDANCE WITH STANDARD PROVISION 115.87(a).

AGENCY INCLUDED SET OF DEFINITIONS AS ARE CALLED FOR IN THE MOST RECENT SURVEY OF SEXUAL VIOLENCE ANNUAL FORM CONDUCTED BY THE DEPARTMENT OF JUSTICE WITHIN THE ANNUAL REPORT IN ACCORDANCE WITH STANDARD PROVISION 115.87(c).

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.87

Standard 115.88 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

- a) PREA POLICY DD-69 MANDATES AGENCY COLLECT ACCURATE, UNIFORM DATA FOR EVERY ALLEGATION OF SEXUAL ABUSE SHALL BE COLLECTED USING A STANDARDIZED INSTRUMENT AND SET OF DEFINITIONS. INCIDENT-BASED SEXUAL ABUSE DATA SHALL BE AGGREGATED AT LEAST ANNUALLY AND SHALL 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 DOJ. AUDITOR VIEWED 2014 & 2015 ANNUAL REPORT ON AGENCY WEBSITE. REVIEW OF SHERIFF'S WEBSITE PROVIDED A NON-COMPLIANT VERSION OF AN ANNUAL REPORT WHICH WAS A STATISTICAL DATA TABLE FOR 2014 & 2015. THERE WAS NO INDICATION THAT THE

DATA COLLECTED WAS USED TO ASSESS AND IMPROVE EFFECTIVENESS OF SEX ABUSE PREVENTION, DETECTION AND RESPONSE POLICIES, PRACTICES, AND TRAINING. NO IDENTIFICATION OF PROBLEM AREAS, CORRECTIVE ACTION TAKEN BY EACH FACILITY OR THE AGENCY AS A WHOLE. ANNUAL REPORT DOES NOT INCLUDE SET OF DEFINITIONS AS REQUIRED UNDER STANDARD PROVISION 115.87(a)/(c). INTERVIEW WITH AGENCY HEAD DESIGNEE INDICATES AGENCY RECENTLY BEGAN DATA COLLECTION AND IS CURRENTLY WORKING ON THE ANNUAL REPORT. CURRENTLY LOOKING TO SEE IF MORE TRAINING IS REQUIRED. INTERVIEWS WITH PREA COORDINATOR AND PREA COMPLIANCE MANAGER INDICATE WORK IS BEING CONDUCTED ON THE ANNUAL REPORT FOR PREA COMPLIANCE.

- b) PREA POLICY DD-69 MANDATES AN ANNUAL REPORT SHALL BE PREPARED, AND SHALL INCLUDE A COMPARISON OF THE CURRENT YEAR'S DATA AND CORRECTIVE ACTIONS WITH THOSE FROM PRIOR YEARS, AND SHALL PROVIDE AN ASSESSMENT OF THE PROGRESS MADE IN ADDRESSING SEXUAL ABUSE. THE REPORT SHALL BE MADE AVAILABLE ON THE SHERIFF'S WEBSITE. REVIEW OF 2014 & 2015 ANNUAL REPORT ON AGENCY WEBSITE DOES NOT ADDRESS ASSESSMENTS OF PROGRESS MADE IN ADDRESSING SEXUAL ABUSE BETWEEN 2014 & 2015.
- c) PREA POLICY DD-69 MANDATES ALL AGGREGATED SEXUAL ABUSE DATA, FROM FACILITIES UNDER DIRECT CONTROL OF THE NEVADA COUNTY SHERIFF'S DEPARTMENT, SHALL BE READILY AVAILABLE TO THE PUBLIC AT LEAST ANNUALLY THROUGH THE SHERIFF'S WEBSITE. AUDITOR VERIFIED 2014 & 2015 ANNUAL REPORT HAS BEEN UPLOADED TO THE AGENCY WEBSITE. INTERVIEW WITH AGENCY HEAD DESIGNEE INDICATES AGENCY HEAD APPROVES ANNUAL REPORT AND VERY FEW PEOPLE HAVE ABILITY TO POST ANNUAL REPORT ON THE AGENCY WEBSITE.
- d) PREA POLICY DD-69 MANDATES SPECIFIC MATERIAL MAY BE REDACTED FROM THE ANNUAL REPORT WHEN PUBLICATION WOULD PRESENT A CLEAR AND SPECIFIC THREAT TO THE SAFETY AND SECURITY OF THE FACILITY, BUT THE REPORT MUST INDICATE THE NATURE OF THE MATERIAL REDACTED. INTERVIEW WITH PREA COORDINATOR INDICATE AGENCY REDACTS SPECIFIC MATERIAL WHICH WOULD PRESENT A CLEAR AND SPECIFIC THREAT TO THE SAFETY AND SECURITY OF THE FACILITY. EXAMPLES OF MATERIAL BEING REDACTED IS NAME OR DESIGNATION OF INMATES, STAFF AND SPECIFIC AREAS WITHIN THE FACILITY.

AUDITOR HAS DETERMINED AGENCY DOES NOT MEET STANDARD 115.88 AS STANDARD PROVISIONS 115.88(a) AND 115.88(b) ARE NON-COMPLIANT.

AGENCY TO PROVIDE 90 DAY CORRECTIVE ACTION STATUS UPDATE BY AUGUST 2016 AND VERIFICATION OF COMPLIANCE NO LATER THAN THE END OF THE 180 DAY CORRECTIVE ACTION PERIOD DEADLINE: NOVEMBER 25, 2016.

CORRECTIVE ACTION:

1. AGENCY TO AMEND 2015 ANNUAL REPORT TO INCLUDE NARRATIVE WHICH VERIFIES AGENCY USED THE DATA COLLECTED TO ASSESS AND IMPROVE EFFECTIVENESS OF SEX ABUSE PREVENTION, DETECTION AND RESPONSE POLICIES, PRACTICES, AND TRAINING. NO IDENTIFICATION OF PROBLEM AREAS, CORRECTIVE ACTION TAKEN BY EACH FACILITY OR THE AGENCY AS A WHOLE.
2. AGENCY TO ADDRESS ASSESSMENTS OF PROGRESS MADE IN ADDRESSING SEXUAL ABUSE BETWEEN 2014 AND 2015.
3. AGENCY TO INCLUDE SET OF DEFINITIONS AS ARE CALLED FOR IN THE MOST RECENT SURVEY OF SEXUAL VIOLENCE ANNUAL FORM CONDUCTED BY THE DEPARTMENT OF JUSTICE.

CORRECTIVE ACTION COMPLETION 9/26/16:

AGENCY POSTED PREA COMPLIANT ANNUAL REPORT FOR 2014 & 2015. ANNUAL REPORT INCLUDES NARRATIVE WHICH INDICATES DATA COLLECTION IS UTILIZED TO PROVIDE SEXUAL SAFETY TO THE INMATES HOUSED IN THEIR FACILITIES IN ACCORDANCE WITH STANDARD PROVISION 115.88(a).

AGENCY INCLUDED SET OF DEFINITIONS AS ARE CALLED FOR IN THE MOST RECENT SURVEY OF SEXUAL VIOLENCE ANNUAL FORM CONDUCTED BY THE DEPARTMENT OF JUSTICE WITHIN THE ANNUAL REPORT IN ACCORDANCE WITH STANDARD PROVISION 115.88(a).

AGENCY ADDRESSED BLIND SPOTS AND COMPARISON BETWEEN DATA OF 2014 & 2015 IN THE ANNUAL REPORT. AGENCY ALSO INCLUDED CORRECTIVE ACTION TAKEN TO ADDRESS THESE ISSUES IN ACCORDANCE WITH STANDARD PROVISION 115.88(b)

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.88

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
 - Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 - Does Not Meet Standard (requires corrective action)
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- a) PREA POLICY DD-69 MANDATES ALL DATA COLLECTED PURSUANT TO STANDARD 115.887 SHALL BE RETAINED IN THE RECORDS UNIT. POLICY ALSO OUTLINES SPECIFIC MEASURES TAKEN TO MAINTAIN SECURITY OF ALL DOCUMENTS. INTERVIEW WITH PREA COORDINATOR INDICATES THE PREA COORDINATOR AND PREA MANAGER MAINTAINS ALL COLLECTED DOCUMENTATION.
 - b) PREA POLICY DD-69 MANDATES ALL AGGREGATED SEXUAL ABUSE DATA, FROM FACILITIES UNDER DIRECT CONTROL OF THE NEVADA COUNTY SHERIFF'S DEPARTMENT, SHALL BE READILY AVAILABLE TO THE PUBLIC AT LEAST ANNUALLY THROUGH THE SHERIFF'S WEBSITE. AGENCY DOES NOT CONTRACT WITH OTHER FACILITIES FOR THE CONFINEMENT OF INMATES. 2014 AND 2015 ANNUAL REPORT POSTED ON AGENCY'S WEBSITE IS AVAILABLE TO THE PUBLIC.
 - c) PREA POLICY DD-69 MANDATES THAT PRIOR TO MAKING AGGREGATED SEXUAL ABUSE DATA PUBLICLY AVAILABLE ALL PERSONAL IDENTIFIERS SHALL BE REMOVED. REVIEW OF 2014 AND 2015 DATA TABLE ON WEBSITE VERIFIES ALL PERSONAL IDENTIFIERS HAVE BEEN REMOVED.
 - d) PREA POLICY DD-69 MANDATES SEXUAL ABUSE DATA COLLECTED PURSUANT TO STANDARD 115.87 SHALL BE MAINTAINED FOR AT LEAST 10 YEARS AFTER THE DATE OF THE INITIAL COLLECTION.

AUDITOR HAS DETERMINED AGENCY MEETS STANDARD 115.89

AUDITOR CERTIFICATION

I certify that:

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

10/18/16

Auditor Signature

Date