

PREA Facility Audit Report: Final

Name of Facility: Mini-Cassia Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 03/24/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Lawrence W. Howell	Date of Signature: 03/24/2023

AUDITOR INFORMATION	
Auditor name:	Howell, Lawrence
Email:	Lawrence.howell@rop.com
Start Date of On-Site Audit:	02/10/2023
End Date of On-Site Audit:	02/10/2023

FACILITY INFORMATION	
Facility name:	Mini-Cassia Juvenile Detention Center
Facility physical address:	718 H Street, Rupert, Idaho - 83350
Facility mailing address:	PO Box 368, Rupert, Idaho - 83350

Primary Contact	
Name:	Trent Bodily
Email Address:	tbodily@minidokacounty.id.gov
Telephone Number:	2084367199

Superintendent/Director/Administrator	
Name:	Trent Bodily
Email Address:	tbodily@minidokacounty.id.gov
Telephone Number:	2084367199

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

Facility Characteristics	
Designed facility capacity:	16
Current population of facility:	5
Average daily population for the past 12 months:	0
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	11-17
Facility security levels/resident custody levels:	1 Level
Number of staff currently employed at the facility who may have contact with residents:	17
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	0
Number of volunteers who have contact with residents, currently authorized to enter the facility:	5

AGENCY INFORMATION	
Name of agency:	Minidoka County Government
Governing authority or parent agency (if applicable):	
Physical Address:	718 H Street, Rupert, Idaho - 83350
Mailing Address:	
Telephone number:	2084367199

Agency Chief Executive Officer Information:	
Name:	Trent Bodily
Email Address:	tbodily@minidokacounty.id.gov
Telephone Number:	2084367199

Agency-Wide PREA Coordinator Information			
Name:	Trent Bodily	Email Address:	tbodily@minidokacounty.id.gov

SUMMARY OF AUDIT FINDINGS

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

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

Number of standards exceeded:	
1	<ul style="list-style-type: none"> 115.316 - Residents with disabilities and residents who are limited English proficient
Number of standards met:	
42	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-02-10
2. End date of the onsite portion of the audit:	2023-02-10

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Janet Loveland, LCPC is the designated victim advocate for the facility. Hotline Counselor, National Child Abuse Hotline (800) 422-4453

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	16
15. Average daily population for the past 12 months:	6
16. Number of inmate/resident/detainee housing units:	1
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	7
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0

<p>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No additional information to include related to the population characteristics of the residents on the first day of the onsite portion of the audit.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>16</p>

<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>0</p>
<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>2</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>Infrequent volunteers include religious service providers and Narcotics Anonymous. They are escorted through the facility and never left alone with residents. Contractors include a substance abuse counselor and teacher from Minidoka County School District.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>7</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None </p>

If "Other," describe:	100% of the residents present were interviewed.
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	100% of the residents present were interviewed.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	100% of the residents present were interviewed. The auditor encountered zero barriers to completing interviews.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>

<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>

<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>

<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>

<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>To determine if the population existed at the facility I reviewed the PAQ, reviewed on-site documentation (including intake paperwork, resident files, and daily logs), and interviewed both staff and residents.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No further information or comments on this topic.</p>
<h2>Staff, Volunteer, and Contractor Interviews</h2>	
<h3>Random Staff Interviews</h3>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>11</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Eleven of sixteen total staff employed at the facility were interviewed. Zero barriers to completing the interviews were encountered by the auditor. All shifts, work assignments, and ranks were represented. Tenure and experience levels ranged from 3 weeks to 27 years,</p>
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Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>8</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

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

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

	<input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No additional information to include regarding selecting or interviewing specialized staff.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

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

Yes

No

<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>Both staff and residents were friendly and open to discuss PREA and the Mini-Cassia Juvenile Detention Center.</p>

Documentation Sampling

Where there is a collection of records to review—such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files—auditors must self-select for review a representative sample of each type of record.

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>There were zero barriers to selecting, accessing, or receiving copies of additional documentation.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	00	0	0

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	There were zero reported sexual abuse investigations.
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

Sexual Harassment Investigation Files Selected for Review

106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were zero reported sexual harassment investigations.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)

Inmate-on-inmate sexual harassment investigation files

108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
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114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There were zero reported sexual abuse and sexual harassment allegations and investigations.
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Non-certified Support Staff

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

121. Who paid you to conduct this audit?	<p><input checked="" type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
Identify the name of the third-party auditing entity	No text provided.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>1. Documents reviewed included:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • Mini-Cassia Juvenile Detention Center (MCJDC) Policy and Procedure Manual. Chapter 16: Prison Rape Elimination Act • Organizational Chart • On site PREA postings <p>2. Interviews included:</p> <ul style="list-style-type: none"> • Random Staff • Youth • Facility Director / PREA Coordinator (Trent Bodily) <p>3. Site Review / Observation:</p> <ul style="list-style-type: none"> • PREA / Sexual Abuse Postings <p>4. Provisions:</p> <p>115.311 (a)-1,2,3,4,5 The Mini-Cassia Juvenile Detention Center (MCJDC) has a zero-tolerance policy towards any form of sexual abuse or sexual harassment. Page 1 lists the purpose of the policy: “The MCJDC has a zero-tolerance policy against all forms of sexual abuse and sexual harassment.” This policy provides the MCJDC’s approach to preventing, detecting, and responding to such conduct, within our facility.”</p> <p>The MCJDC Zero Tolerance Policy is available to staff, residents, and members of the public. The MCJDC Zero Tolerance Policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment includes sanctions for those found to have participated in prohibited behaviors and includes agency strategies to reduce and prevent sexual abuse and harassment of residents.</p> <p>115.311 (b)-1,2,3 The agency has a designated PREA Coordinator - Trent Bodily . He also holds the agency title of Director . His position is an upper-level position and when interviewed He reported having sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facility.</p> <p>Through staff interviews, PREA Auditor Howell found that upper-level staff</p>

understood the PREA standards and how they are implemented at Mini-Cassia Juvenile Detention Center. Mr. Bodily explained that due to the small size of the facility he had sufficient time and authority to coordinate the facility efforts to comply with PREA standards.

115.311 (c)-1,2,3,4 The MCJDC meets the standard of having a designated PREA Coordinator in the organizational structure, who has sufficient time to coordinate the facility efforts to comply with PREA standards. This section 115.311 (c) was rated as N/A because the County Executive Board only governs one juvenile facility.

Through direct observation during the on-site audit, interviews of both residents and staff, and reviewing resident and staff files it is evident MCJDC includes the requirements of this provision in the facility daily operations. Upper-level staff as well as direct care staff could explain the intent of PREA and how it is implemented at Mini-Cassia Juvenile Detention Center.

The facility meets the requirements of standard 115.311.

Corrective Action Findings: None

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making of the compliance decision.</p> <p>Documents reviewed included: Pre-Audit Questionnaire Mini-Cassia Juvenile Detention Center Policy and Procedure Manual. Chapter 16: Prison Rape Elimination Act</p> <p>Interviews included: Director / PREA Coordinator (Trent Bodily)</p> <p>Site Review / Observation: N/A</p> <p>Provisions: Standard 115.312 (a & b) does apply to Mini-Cassia Juvenile Detention Center because the facility does contract with another entity for the confinement of youth. Bannock and Gooding County both have MOU's to place youth at MCJDC. The agreements were reviewed and auditor Howell determined them PREA compliant.</p> <p>The facility meets the requirements of standard 115.312.</p> <p>Corrective Action Findings: None</p>

115.313	Supervision and monitoring
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 492">Documents reviewed included:</p> <p data-bbox="280 528 1374 770"> MCJDC Policy and Procedure Manual. Chapter 16: Prison Rape Elimination Act Facility Schematics Unannounced Program Visits Documentation Staff Roster Resident Roster Staffing Plan </p> <p data-bbox="280 851 606 887">Interviews included:</p> <p data-bbox="280 922 1082 1093"> PREA Coordinator / Director / Agency Head (Trent Bodily) Random residents Random staff </p> <p data-bbox="280 1137 703 1173">Site Review / Observation:</p> <p data-bbox="280 1209 1278 1245">Staff to student ratio observations (multiple times throughout the day)</p> <p data-bbox="280 1281 459 1317">Provisions:</p> <p data-bbox="280 1397 1485 2051"> 115.313 (a) Director Trent Bodily confirmed the Mini-Cassia Juvenile Detention Center policy mandates a minimum of one staff for each eight youth with one staff being female. The PAQ showed no instances of deviation from the planned staff to student ratio. Through the staff interviews, Auditor Howell found no written shift reports showing short staffing or ratio issues in the daily operations. 7 of 7 residents reported feeling safe at Mini-Cassia Juvenile Detention Center (MCJDC) and that staff provide adequate supervision of the residents. The agency staffing plan was reviewed by auditor Howell. When reviewing the staff rosters and comparing them to the average student population by month for the past 12 months and taking into consideration a reported low staff turnover rate, Auditor Howell found no obvious reason to believe there had been a deviation from the facility staffing plan. MCJDC does use surveillance cameras but does not use cameras as part of the supervision of residents and staffing plan. There are cameras throughout the facility. Evidence of compliance with this standard was gathered in interviews of the Director , Shift Supervisors, and direct care staff. All individuals interviewed confirmed the staffing plan is developed to protect residents, video monitoring is not part of the plan, and </p>

the staffing plan is reviewed daily by the facility management team. When a scheduled staff is absent, and the staff to resident ratio may be at risk, the supervisor calls in other staff and authorizes overtime to fill temporary vacancies. Auditor Howell reviewed a staffing evaluation. The document included a thorough review of the staffing plan, safety problems, deviations from the staffing plan, video camera use, and staff to resident ratios

115.313 (b) Mini-Cassia Juvenile Detention Center Policy requires constant supervision and monitoring of the residents while in the facility. The policy states that the facility maintains staff ratios at all times unless imminent and dangerous circumstances take place that alter the ratio. The established ratios are 1:8 during waking hours and 1:16 during sleeping hours. During on-site observations by Auditor Howell, the the observed minimum ratios were met or exceeded at all times. Observed ratios were 1:1, 1:2.33, and 1:3.5 .

115.313 (c) The facility roster showed 16 full time staff employed for a current resident population of 7 residents. Observed staff to student ratios were 1:1, 1:2.33, and 1:3.5. PREA Auditor Howell found no evidence nor was there a report of the staff to student ratio deviating from the planed ratio of 1:8 daytime and 1:16 nightttime ratio. During random resident interviews, when asked, "How often are staff the with you?" 7 of 7 residents replied that direct care staff were present at all times.

115.313 (d) When interviewed, the Director he replied the staffing plan is reviewed and revised at least annually and when necessary as a result of the resident population fluctuating. Mr. Bodely Director described evaluating the staff to resident ratio "as necessary" and "daily" to make sure staff to resident ratios were appropriate.

115.313. (e) PREA Auditor Howell did find evidence to support the PAQ that stated higher level supervisors conducted unannounced rounds on all shifts. Facility policy prohibits staff from alerting the staff members that the supervisory unannounced rounds are occurring. During random staff interviews, the staff explained the unannounced rounds do occur. Facility management provided unannounced rounds logs demonstrate compliance. The logs include observations of:

- o Youth routines
- o Group locations
- o Interactions
- o Resident Split Up
- o Resident Hygiene
- o Staffing Requirements
- o Staff positioning
- o Blind Spot Check
- o Physical Plant Cleanliness
- o Staff/resident boundaries
- o Resident Mood and Behavior

Based on the auditor observations, information shared during the staff and resident interviews, and the documents reviewed during the Pre On-

Site, On-Site, and Post On-Site phases of the audit, the facility meets the requirements of standard 115.313

Corrective Action Findings: None

115.315	Limits to cross-gender viewing and searches
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision</p> <p data-bbox="280 456 770 492">Documents reviewed included:</p> <p data-bbox="280 501 341 533">PAQ</p> <p data-bbox="280 542 1433 618">Mini-Cassia Juvenile Detention Center Policy and Procedure Manual. PREA Section 16-18</p> <p data-bbox="280 627 970 658">MCJDC Screening, Intake, and Admissions Packet</p> <p data-bbox="280 667 651 698">Resident PREA Curriculum</p> <p data-bbox="280 707 469 739">PREA Posters</p> <p data-bbox="280 779 604 815">Interviews included:</p> <p data-bbox="280 824 539 855">Random residents</p> <p data-bbox="280 864 472 896">Random staff</p> <p data-bbox="280 904 523 936">Supervisory staff</p> <p data-bbox="280 945 673 976">Director / PREA Coordinator</p> <p data-bbox="280 1061 703 1097">Site Review / Observation:</p> <p data-bbox="280 1106 561 1137">Living Unit postings</p> <p data-bbox="280 1146 526 1178">Building postings</p> <p data-bbox="280 1187 558 1218">Classroom postings</p> <p data-bbox="280 1258 459 1294">Provisions:</p> <p data-bbox="280 1303 1465 1581">115.316 (a) The Mini-Cassia Juvenile Detention Center PREA Policy Section 16-18 states that the Juvenile Detention Center staff takes appropriate steps to ensure that youth with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps include providing access to Interpreters, and written materials provided in formats or through methods that ensure effective communication.</p> <p data-bbox="280 1590 1455 1751">During the resident interviews 7 of 7 (100%) youth interviewed claimed English as their primary language. During staff interviews none of the staff could remember a youth, admitted in the last 12 months, that claimed another language as their primary language.</p> <p data-bbox="280 1760 1481 2087">The Juvenile Detention Center policy addresses the provision of support services for disabled residents and provides the equal opportunity to participate in or benefit from all aspects of the facilities efforts to prevent, detect, and appropriately respond to sexual abuse and harassment. The policy prohibits the use of resident interpreters, readers, and other forms of resident assistants except in limited circumstances where an extended delay could compromise a resident’s safety, performance of a first responder’s duties, or the investigation of the allegations. Supervisor and Assistant Director interviews confirmed knowledge of the policy and</p>

process.

115.316. (b) During interviews of the Director explained the facility does whatever is necessary to ensure the residents understand the PREA standards and their rights. He made it clear they would only use staff as translators. During the past 12 months, the facility did not have any youth who were assessed as needing interpreting services because they had a disability or were limited English proficient. If they had, the language Access Court provided "Language Line Solutions" (language interpreter services with access to 240+ languages) is available by phone and can be accessed by staff 24 Hour per day 7 days per week. Furthermore, the PREA Audit notice was printed in English and Spanish. The facility is prepared to ensure equal access to limited English proficient or disabled. This determination of meets standard was made based on interviews of staff, administrators, facility observations, and a review of the residents' case files.

115.316 (c) The Director / PREA Coordinator explained Mini-Cassia Juvenile Detention Center does not use resident interpreters or assistants for reporting sexual abuse and sexual harassment allegations as the practice could compromise the integrity of the reporting process. The facility's intake staff did have written PREA related information to provide to youth upon admission to the Juvenile Detention Center. At the time of the audit there were no residents listed, interviewed, or reported as needing interpreter services or the need for translated PREA related documents. The staff and resident interviews resulted in consistent responses that Mini-Cassia Juvenile Detention Center had not had a recent need for the use of interpreters or services for residents with a disability that hindered their ability to communicate an allegation related to sexual abuse or harassment.

It is noteworthy that there were bilingual staff employed at the MCJDC and one staff held a college degree in sign language. The facility EXCEEDS the requirements of standard 115.316.

Corrective Action: None

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included: PAQ Mini-Cassia Juvenile Detention Center Policy and Procedure Manual. PREA Section 16-18 Residents with Disabilities MCJDC Screening, Intake, and Admissions Packet Resident PREA Curriculum PREA Posters</p> <p>Interviews included: Random residents Random staff Supervisory staff Director / PREA Coordinator</p> <p>Site Review / Observation: Living Unit postings Building postings Classroom postings</p> <p>Provisions: 115.316 (a) The Mini-Cassia Juvenile Detention Center PREA Policy Section 16-18 states that the Juvenile Detention Center staff takes appropriate steps to ensure that youth with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps include providing access to Interpreters, and written materials provided in formats or through methods that ensure effective communication. During the resident interviews 7 of 7 (100%) youth interviewed claimed English as their primary language. During staff interviews none of the staff could remember a youth, admitted in the last 12 months, that claimed another language as their primary language. The Juvenile Detention Center policy addresses the provision of support services for disabled residents and provides the equal opportunity to participate in or benefit from all aspects of the facilities efforts to prevent, detect, and appropriately respond to sexual abuse and harassment. The policy prohibits the use of resident interpreters, readers, and other forms of resident assistants except in limited circumstances where an extended delay could compromise a resident’s safety, performance of a first responder’s duties, or the investigation of the allegations.</p>

Supervisor and Assistant Director interviews confirmed knowledge of the policy and process.

115.316. (b) During interviews of the Director explained the facility does whatever is necessary to ensure the residents understand the PREA standards and their rights. He made it clear they would only use staff as translators. During the past 12 months, the facility did not have any youth who were assessed as needing interpreting services because they had a disability or were limited English proficient. If they had, the language Access Court provided "Language Line Solutions" (language interpreter services with access to 240+ languages) is available by phone and can be accessed by staff 24 Hour per day 7 days per week. Furthermore, the PREA Audit notice was printed in English and Spanish. The facility is prepared to ensure equal access to limited English proficient or disabled. This determination of meets standard was made based on interviews of staff, administrators, facility observations, and a review of the residents' case files.

115.316 (c) The Director / PREA Coordinator explained Mini-Cassia Juvenile Detention Center does not use resident interpreters or assistants for reporting sexual abuse and sexual harassment allegations as the practice could compromise the integrity of the reporting process. The facility's intake staff did have written PREA related information to provide to youth upon admission to the Juvenile Detention Center. At the time of the audit there were no residents listed, interviewed, or reported as needing interpreter services or the need for translated PREA related documents. The staff and resident interviews resulted in consistent responses that Mini-Cassia Juvenile Detention Center had not had a recent need for the use of interpreters or services for residents with a disability that hindered their ability to communicate an allegation related to sexual abuse or harassment.

It is noteworthy that there were bilingual staff employed at the MCJDC and one staff held a college degree in sign language. The facility EXCEEDS the requirements of standard 115.316.

Corrective Action: None

115.317	Hiring and promotion decisions
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 492">Documents reviewed included:</p> <p data-bbox="280 497 1337 573">Mini-Cassia Juvenile Detention Center Policy and Procedure 11-1 Employee Qualifications and Benefits.</p> <p data-bbox="280 577 491 613">Personnel Files</p> <p data-bbox="280 618 1203 654">Criminal Records and Child Abuse Registry Check Documentation</p> <p data-bbox="280 658 628 694">Employment Application</p> <p data-bbox="280 698 517 734">Training Records</p> <p data-bbox="280 775 606 810">Interviews included:</p> <p data-bbox="280 815 683 851">Director / PREA Coordinator</p> <p data-bbox="280 855 628 891">Administrative Assistant</p> <p data-bbox="280 896 475 931">Random Staff</p> <p data-bbox="280 972 702 1008">Site Review / Observation:</p> <p data-bbox="280 1012 363 1048">None.</p> <p data-bbox="280 1088 443 1124">Provision:</p> <p data-bbox="280 1128 1461 1496">115.317 (a) The Mini-Cassia County Juvenile Detention Center Policy and Procedure 11-1 Employee Qualifications and Benefits (page 1) prohibits hiring or promoting anyone who may have contact with youth and does not use services of any contractor who may have contact with the person if the person: has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; or has been convicted or civilly or administratively adjudicated or engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.</p> <p data-bbox="280 1500 1455 1706">The Director confirmed during interviews that the Mini-Cassia Juvenile Detention Center has not hired, promoted, or contracted with anyone who meets the criteria listed in the above paragraph. A review of personnel files revealed no documented evidence that would show the facility was out of compliance with this section of standard 115.317.</p> <p data-bbox="280 1742 1481 2074">115.317 (b) Mini-Cassia Juvenile Detention Center Policy considers any incidents of sexual harassment in determining whether to hire, promote, or contract for services. When interviewed by PREA Auditor Howell, the Chief Juvenile Officer (who also has Human Resource Director duties) explained that the Mini-Cassia Juvenile Detention Center would find out such information through criminal background checks, pre-employment reference checks, and a thorough interview of the applicant for an open position. The Director explained the interview process for hiring, promotions and contract positions. A review of policy 11-1 (pages 1-2) and personnel files</p>

revealed no documented evidence that would show the facility was out of compliance with this section of standard 115.317.

115.317 (c & d) MCJDC policy 11-1 dictates hiring procedures in order for the facility to be in compliance with this standard. Before hiring new employees, volunteer, or contractors who may have contact with youth, the MCJDC requires hiring staff to perform a criminal background records check, complete a State child abuse registry review, and contact all prior institutional employers in search of substantiated allegations of abuse or resignation during a pending investigation of an allegation of abuse. Mini-Cassia Juvenile Detention Center has been conducting background checks, child abuse registry checks, completing reference checks, and attempted to ask previous juvenile institution employers of applicant's past involvement in PREA related incidents. Auditor Howell reviewed the interview questions and discussed the screening process with the Director.

115.317 (e) Mini-Cassia Juvenile Detention Center policy states the facility conducts criminal background checks of current employees and contractors who may have contact with residents every five years. Auditor Howell's review of Personnel files showed the background checks were completed in accordance with PREA Standards. The background checks are completed regularly, which meets the five-year standard. Auditor Howell found all existing employees had their background check completed on 01/30/23.

115.317 (f) Mini-Cassia Detention Center did provide written evidence about asking all applicants and employees who may have contact with residents directly about previous PREA related misconduct described in paragraph 115.317 (a). Also, Director Trent Bodily disclosed in his interview that the facility also practices a policy of ongoing self-disclosure regarding involvement in PREA related incidents.

115.317 (g) In accordance with this standard, Mini-Cassia Juvenile Detention Center Director stated in his interview that material omissions regarding such misconduct (PREA related) or the provision of materially false information is grounds for termination of employment.

115.317 (h) According to interviews of the Director, unless prohibited by law, Mini-Cassia Juvenile Detention Center provides information on substantiated allegations of sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer for whom the former employee has applied to work. In addition, the Director affirmed separately in his interview that the facility does consider all items listed in 115.317(a-h) when making hiring and promotion decisions. MCJDC Policy and Procedure 11-1 supports the documentation requirements of this standard.

Based on the information received and the documents reviewed in the interviews the facility meets the requirements of standard 115.317.

Corrective Action: None

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included: Facility Schematics</p> <p>Interviews included: Director / PREA Coordinator Administrative Assistant Supervisory Staff Random Staff Random Residents</p> <p>Site Review / Observation: Observation of the facility operations during the on-site tour. Demonstration of the existing video surveillance system.</p> <p>Provisions: 115.318 (a-b) During interviews of the Director / PREA Coordinator he explained there had been no substantial modification to the facility (including upgrades to the camera system) since the last PREA Audit. The Director was very familiar with the camera system and the importance of ensuring resident privacy.</p> <p>The staff interviews, resident interviews, the on-site tour of the facility, and the schematics provided to the auditor all corroborated that the facility meets the requirements of standard 115.318 (a-b)</p> <p>Corrective Action Findings: None</p>

115.321	Evidence protocol and forensic medical examinations
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 770 488">Documents reviewed included:</p> <p data-bbox="280 499 1374 575">Mini-Cassia Juvenile Detention Center Policy and Procedure 16-16 Responsive Planning</p> <p data-bbox="280 582 1410 658">Agreement with Rupert Police Department for the Investigation of Sexual Abuse Allegations.</p> <p data-bbox="280 734 606 768">Interviews included:</p> <p data-bbox="280 806 671 840">Director / PREA Coordinator</p> <p data-bbox="280 848 625 882">Administrative Assistant</p> <p data-bbox="280 891 624 925">Random staff interviews</p> <p data-bbox="280 934 676 967">Random resident interviews</p> <p data-bbox="280 976 1150 1010">Minidoka Memorial Hospital Emergency Room Representative</p> <p data-bbox="280 1019 1043 1052">Minidoka County Sheriff’s Department Representative</p> <p data-bbox="280 1090 703 1124">Site Review / Observation:</p> <p data-bbox="280 1133 509 1167">Facility postings</p> <p data-bbox="280 1176 735 1209">Brochures available to residents</p> <p data-bbox="280 1247 458 1281">Provisions:</p> <p data-bbox="280 1319 1477 1518">115.321 (a) Mini-Cassia Juvenile Detention Center PREA Policy does follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions when responding to allegations of sexual abuse. Random staff interviews revealed the MCJDC staff are aware of the physical evidence expectations for First Responders.</p> <p data-bbox="280 1556 1469 1756">115.321 (b) The Director / PREA Coordinator stated the policy does follow a protocol that is developmentally appropriate for youth and is current (i.e. adapted from the most recent edition of the US Department of Justice’s Office on Violence Against Women publications) . Auditor Howell was able to ascertain and confirm the following:</p> <p data-bbox="280 1765 1442 1964">The facility does not conduct administrative or criminal investigations. Allegations are referred to the Ruppert City Police Department and/or the Minidoka County Sheriff’s Department and the Minidoka County Prosecuting Attorney’s Office for administrative and criminal investigations. Random staff interviews confirmed an understanding of the facility investigations protocol.</p> <ul data-bbox="280 1973 1477 2089" style="list-style-type: none"> · Minidoka Memorial Hospital is responsible for and qualified to conduct SANE sexual abuse forensic medical exams at no cost to the youth. There were no forensic medical exams, related to Mini-Cassia Juvenile Detention Center, conducted in the

past 12 months.

· Mental Health Clinician Janet Loveland provides outside the facility emotional support and crisis counseling services. During interviews, the facility Director / PREA Coordinator confirmed his understanding of the practices and requirements of standard 115.321 (b).

115.321 (c) In accordance with Mini-Cassia Juvenile Detention Center Policy, in the event of a PREA related allegation, the Director or on duty supervisor would call the Child Abuse Hotline and a facility representative would take the resident to Minidoka Memorial Hospital for the SAFE examination. The hospital services include Sexual Assault and Violence Response and Child Protection Teams. Auditor Howell reviewed the hospital web site and found a comprehensive explanation of the structure of the department, the staff training, and multiple ways the medical center provides support, forensic medical services to meet the needs of sexual assault victims. In a phone interview, the Minidoka Hospital Emergency Room representative "Adrian" explained that most nurses were qualified and trained SANE nurses. It was explained that it was agency practice to have a forensic nurse available 24 hours a day. Minidoka Hospital personnel reported no knowledge of any forensic exams involving youth from the Mini-Cassia Juvenile Detention Facility during the past 12 months.

115.321 (d) In accordance with the agreement between the Mini-Cassia Juvenile Detention Center and Clinician Janet Loveland confirmed she provides intervention and related sexual assault assistance services free of charge. The services include 24 hour per day access for reporting, advocacy, and forensic exams. Of the residents interviewed, 7 of 7 were able to describe how to access the services in a confidential manner while in the Mini-Cassia Detention Center.

115.321 (e) Director / PREA Coordinator Trent Bodily explained the Mini-Cassia County Regional Juvenile Detention Center utilizes outside (and contracted through Idaho Department of Corrections) Clinician Janet Loveland to provide advocacy and emotional support services. However, the Hotline remains available 24/7 to support youth as needed. Auditor Howell observed posters zero tolerance posters with the hotline number in most resident living areas, classrooms, and dining areas. Auditor Howell called the Hotline number and verified the services available, if a caller could remain anonymous, and if the services were free of charge to residents of Mini-Cassia Juvenile Detention Center.

Also on the posters are the phone numbers for National Child Abuse Hotline (800) 422-4453, Minidoka County Sheriff's Office (208) 434-2320 and the physical address for Janet Loveland PO Box 111, Albion, Idaho 83311.

115.321 (f) The Minidoka Sheriff's Department department conducts all criminal investigations. The Minidoka Memorial Hospital is responsible for and qualified to conduct SANE sexual abuse forensic medical exams at no cost to the youth. Both agencies follow uniform protocols that are age appropriate for youth that are residents of the Juvenile Detention Center.

115.321 (g) Auditor is not required to audit this provision.

115.321. (h) Mini-Cassia Juvenile Detention Center is in compliance with standard 115.321 (h) because the Director / PREA Coordinator is appropriately trained. The facility does have an agreement for victim support services with Janet Loveland who is a trained clinician available 24/7 for advocacy service, emotional support; in accompaniment through forensic examination and investigative interview upon request; and provision of information and resources.

The facility meets the requirements of standard of 115.321.

Corrective Action Findings: None

115.322	Policies to ensure referrals of allegations for investigations
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 1369 376">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 416 772 452">Documents reviewed included:</p> <p data-bbox="280 456 341 492">PAQ</p> <p data-bbox="280 497 1398 573">Mini-Cassia Juvenile Detention Center PREA Standards Policy 16-16 Responsive Planning.</p> <p data-bbox="280 577 590 613">Staff Training Records</p> <p data-bbox="280 654 606 689">Interviews included:</p> <p data-bbox="280 694 683 730">Director / PREA Coordinator</p> <p data-bbox="280 734 625 770">Random staff interviews</p> <p data-bbox="280 775 679 810">Random resident interviews</p> <p data-bbox="280 851 705 887">Site Review / Observation:</p> <p data-bbox="280 891 510 927">Facility postings</p> <p data-bbox="280 931 737 967">Brochures available to residents</p> <p data-bbox="280 1008 459 1043">Provisions:</p> <p data-bbox="280 1084 1455 1568">115.322 (a) Mini-Cassia Juvenile Detention Center PREA Policy 16-16 requires that all allegations of sexual abuse and sexual harassment are investigated by the Rupert City Police Department and/or the Minidoka County Sheriff’s Department, and the Minidoka County Prosecuting Attorney’s Office.” Interviews of agency representatives confirmed there were zero reported allegations of abuse or investigations during the past 12 months, therefore there were zero administrative investigations and zero criminal investigations. As result of zero investigations, PREA Auditor Howell could not review investigation reports to confirm the documentation matched the written procedure or PREA standards. Interviews of staff confirmed the staff’s knowledge of which agencies are responsible for administrative and criminal investigations in all allegations of sexual abuse and sexual harassment.</p> <p data-bbox="280 1608 1477 2069">115.322 (b) The Zero Tolerance Policy is in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations. There were zero referrals in the past 12 months as evidenced by auditor confirmation with the Rupert City Police Chief, interviews with Mini-Cassia Juvenile Detention Center management, and interviews of random staff and students. As a result of there being no evidence showing allegations during the past 12 months, Auditor Howell asked the Director / PREA Coordinator and Supervisors if there had been any allegations since the last PREA audit. Each interviewee responded “no” when asked if there had not been any. This auditor also reviewed the previous (February 25, 2019) Final PREA Audit Report for any reported allegations or investigations. The 2019 audit report listed none.</p>

115.322 (c) The Mini-Cassia Juvenile Detention Center policy and Rupert City Police Department protocols govern PREA related investigations. PREA Auditor Howell confirmed with the Police Department that they are the authorized outside agency who conducts investigations into allegations of sexual abuse and sexual harassment.

115.322 (d) The auditor is not required to audit this provision.

115.322 (e) Auditor is not required to audit this provision.

During staff interviews, including the Director / PREA Coordinator and random staff, it was evident that the facility staff understood the investigation process and were able to explain the process for involving qualified outside agencies to complete administrative and criminal investigations. The staff training records showed the staff received appropriate and current PREA training related to policies to ensure proper referrals of allegations for investigations. The most recent related (PREA Refresher) training date listed in the training records was June 01, 2022.

The facility does meet all of the requirements of standard 115.322 (a-e)

Corrective Action Findings: None

115.331	Employee training
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 770 488">Documents reviewed included:</p> <p data-bbox="280 499 1315 651">PAQ Mini-Cassia Juvenile Detention Center PREA Staff Training Curriculum PPT 2022 Staff Training Hours (summary) PREA brochure</p> <p data-bbox="280 689 606 723">Interviews included:</p> <p data-bbox="280 734 671 853">Director / PREA Coordinator Random Staff Specialized staff</p> <p data-bbox="280 891 719 925">Site Review / Observations:</p> <p data-bbox="280 936 1453 1012">Observation of opposite gender staff announcements upon entering resident living area.</p> <p data-bbox="280 1050 456 1084">Provisions:</p> <p data-bbox="280 1095 1474 1373">115.331 (a) The Mini-Cassia Juvenile Detention Center PREA Policy does require that the facility provide PREA related training to all its employees who may have contact with youth. The training is tailored to the unique needs and attributes of youth in juvenile facilities and to the specific gender(s) represented at the facility.” The training includes a power point and PREA video. The training documentation is reserved through employee signature that the employees understand the training they received. Training video content includes:</p> <p data-bbox="280 1453 1466 2074">The Zero Tolerance policy for sexual abuse, sexual harassment, How to fulfill their PREA responsibilities under Juvenile Detention Center sexual abuse and harassment prevention, detection, reporting, and response policies and procedures Residents right to be free from sexual abuse and sexual harassment The right of residents and employees to be free from sexual abuse and harassment The right of residents to be free from retaliation for reporting sexual abuse and harassment The dynamics of sexual abuse and sexual harassment in juvenile facilities The common reactions of juvenile victims of sexual abuse and harassment How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents. How to avoid inappropriate relationships with residents How to communicate effectively and professionally with residents including lesbian,</p>

gay, bisexual, transgender, intersex, or gender nonconforming residents; and How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities

Relevant laws regarding the applicable age of consent (age of consent in Missouri is 17 years)

The staff are provided a training that describes the facilities zero tolerance of sexual abuse and harassment. Random staff interviews revealed the staff know the learning objectives of the training (listed in #1-12 above).

115.331 (b) The Mini-Cassia Juvenile Detention Center policy requires that training is tailored to the unique needs and attributes and gender of the residents at the facility. Mini-Cassia Juvenile Detention Center provides services to youth of all gender identities. Youth are housed based on their gender identity. At the time of the on-site portion of the audit there were both male and female identifying residents. The staff of the opposite gender receive the same training regardless of what shift they are assigned. Training documentation reviewed by PREA Auditor Howell supports this standard. The training is initiated during new employee orientation and is continued through annual refresher training.

115.331 (c) The Mini-Cassia Juvenile Detention Center Policy states that the facility documents employees written verification that they receive PREA training and understand their PREA responsibilities. The agency provides refresher training every year. This was confirmed by auditing the employee training files and interviewing the staff. The most recent PREA Refresher was conducted on June 01, 2022.

115.331 (d) The PREA Coordinator provided the auditor with training documentation showing proof the staff acknowledge with their signature that they understand the training they received. This was confirmed by auditing the employee training files. All employees had signed acknowledgements of receiving PREA training and their responsibilities as first responders.

In the interviews, the staff demonstrated they had a good understanding of 115.331 (a, 1-12) and 115.331 (b, c, d). Furthermore, the e-mail training documentation verified the completion of and understanding of the required PREA training.

Auditor Howell interviewed staff, reviewed the training policy, reviewed the training curriculum, and verified training is taking place and determined the facility meets the requirements of standard 115.331.

Corrective Action Findings: None

115.332	Volunteer and contractor training
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 770 492">Documents reviewed included:</p> <p data-bbox="280 497 986 613">Mini-Cassia Juvenile Detention Center PREA Policy PREA Staff Training Curriculum PREA Training Protocols</p> <p data-bbox="280 654 606 689">Interviews included:</p> <p data-bbox="280 694 671 810">Director / PREA Coordinator Random Staff Specialized staff</p> <p data-bbox="280 851 719 887">Site Review / Observations:</p> <p data-bbox="280 891 357 927">None</p> <p data-bbox="280 967 459 1003">Provisions:</p> <p data-bbox="280 1008 1477 1205">115.332 (a) The Mini-Cassia Juvenile Detention Center Policy states that the Director shall ensure that all staff, volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Director / PREA Coordinator confirmed his responsibility in this area.</p> <p data-bbox="280 1245 1457 1527">115.332 (b) The Mini-Cassia Juvenile Detention Center Director / PREA Coordinator explained all volunteers and contractors who have contact with residents would be notified of the agency’s Zero Tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. He also explained the training was the same as the full-time paid staff. Because the use of contractors or volunteers was limited in the past year due to COVID, Auditor Howell was not able to review documentation related to 115.332 (b).</p> <p data-bbox="280 1568 1474 1765">115.332 (c) Because there were no contractors or volunteers utilized at Mini-Cassia County Regional Juvenile Detention Center during the past 12 months, PREA Auditor Howell was unable to review training documentation related to 115.332 (b) that confirmed that volunteers and contractors understand the training they have received.</p> <p data-bbox="280 1805 1466 1841">The facility does meet the requirements of standard 115.332 (a, b, and c).</p> <p data-bbox="280 1881 807 1917">Corrective Action Findings: None</p>

115.333	Resident education
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 770 492">Documents reviewed included:</p> <p data-bbox="280 501 1452 819">PAQ Mini-Cassia Juvenile Detention Center PREA Pamphlet. PREA educational video shown upon admission. MCJDC Policies 16.4 Placement of Residents and 16.1 Reporting and Resident/Staff Education Site Posters Juvenile Handbook PREA Brochures</p> <p data-bbox="280 860 604 896">Interviews included:</p> <p data-bbox="280 904 544 1106">PREA Coordinator Intake Staff Specialized Staff Random Staff Random Residents</p> <p data-bbox="280 1146 719 1182">Site Review / Observations:</p> <p data-bbox="280 1191 1422 1303">Posters hanging in areas commonly used by residents such as: Common room in living areas, administrative areas, Building hallways, and Intake area. PREA materials available to residents, staff, and guests.</p> <p data-bbox="280 1344 456 1379">Provisions:</p> <p data-bbox="280 1420 1474 1653">115.333 (a) The facility PREA Policy states that during the admissions process the youth are provided, by staff, age appropriate PREA information about the agencies Zero Tolerance Policy and how to report incidents or suspicions of sexual abuse, sexual harassment or sexual activity. This is done through verbal explanation by the intake staff and being provided the appropriate PREA education information in the PREA brochure.</p> <p data-bbox="280 1662 1474 2074">When interviewed, 7 of 7 residents reported learning of and understanding the MCJDC PREA Policies and how to report sexual abuse and sexual harassment. Over the past twelve months 236 youth were admitted to the Mini-Cassia Juvenile Detention Center. Of the 236 intakes 113 stayed longer than 72 hours. The intake documents include an acknowledgement signed by each resident that they received and understood the Zero Tolerance policy information. Following their intake briefing and after watching the PREA video there is an acknowledgement page for the residents to sign. Also, the Mini-Cassia Resident Handbook Exam includes questions from the PREA resident education materials. When reviewing resident files, PREA Auditor Howell found no evidence that there were residents who did not receive the</p>

required Zero Tolerance Policy information.

115.333 (b) The Mini-Cassia Juvenile Detention Center PREA Policy states MCJDC shall provide comprehensive, age appropriate education to youth about their rights to be free from sexual abuse, sexual harassment, and retaliation for reporting. Through the random resident interviews, Auditor Howell found evidence that 7 of 7 residents had received a comprehensive PREA education upon intake. The average length of stay was reported at 5.8 days. After observing a resident intake receive PREA educational materials, a verbal explanation, and watch the PREA video, auditor Howell determined the facility was compliant with standard 114.333 (b) due to the comprehensive education the residents receive upon admission and is followed up with pertinent information in in both the Resident Handbook, postings, and PREA video. Auditor Howell recommended the facility show a PREA video weekly on a weekly basis they would create a system where no youth would go longer than 7 days from intake education to re-education. The resident files showed resident acknowledgement of receiving and understanding the PREA education materials.

115.333 (c) During the intake staff interview Auditor Howell asked how they ensured current residents as well as those transferred from other facilities were educated on the facilities PREA Policy. The intake staff confirmed that all residents, regardless of where they came from, are provided the same resident education about their rights to be free from sexual abuse, sexual harassment, and retaliation for reporting. When asked, "How long from the date of intake are residents made aware of their rights as prescribed by PREA?", the staff replied: "The same day they arrive, unless they arrive in the middle of the night...then we complete the process first thing in the morning."

115.333 (d) The Director / PREA Coordinator provided Auditor Howell with the resident education materials in formats accessible to all residents at the facility during the audit. When he was asked how intakes with limited reading skills could learn the PREA related information they responded the staff would read the print information to the resident with the limited reading skills, get an interpreter, or get a bilingual staff to translate the PREA information and show the resident how they can call the hotline number (posted on the walls in many areas) to file a report or request emotional support services. Furthermore, the courts have access to interpretive services for youth with special needs or disabilities including youth who are deaf, speech impaired, blind, or otherwise disabled. It is not Mini-Cassia Juvenile Detention Center policy to allow residents to be used as translators for other residents. One MCJDC held a degree in sign language and was qualified to interpret if a deaf resident were to be admitted to the facility.

115.333 (e) The Director / PREA Coordinator and were able to clearly explain the resident PREA education process. Upon auditor review, 7 of 7 resident files reviewed included documentation including the residents' acknowledgement of receiving and understanding the PREA information. In the resident interviews the youth were able to explain the process consistent with what is written in the facility PREA Policy and what is expected to meet this standard. 7 of 7 residents said they believed they

could report allegations of sexual abuse and harassment without being punished or fearing retaliation.

115.333 (f) PREA related information is continuously and readily available to residents. During the on-site portion of the audit Auditor Howell was provided unobstructed movement within the facility and viewed PREA posters in the resident living units, classroom, and common areas. Posters included the name, address, and phone number to report sexual abuse and sexual harassment. Auditor Howell also received a copy of and reviewed the PREA information in the brochure. PREA brochures and postings were observed in common areas of the building and observed in the lobby of Juvenile Detention Center building. Postings include the phone number for the National Child Abuse Hotline (800) 442-4453, the Minidoka Sheriff's Department, and the Detention Director (208) 436-7199. The calls are toll free and posted in each resident living unit. Auditor Howell called to verify the number was working and would be a resource for residents when they called. The Hotline representatives confirmed the intent of the services and the free services available to youth in need.

As a result of the documentation reviewed, intake procedures observed, and information learned during the staff and student interviews the Mini-Cassia Juvenile Detention Center met the standard of 115.333 (a-f).

Corrective Action Findings: None

115.334	Specialized training: Investigations
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 772 488">Documents reviewed included:</p> <p data-bbox="280 499 1461 741">PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-7 Criminal and Administrative Investigations. Training Documentation Certificate of completion - Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations.</p> <p data-bbox="280 779 608 813">Interviews included:</p> <p data-bbox="280 824 868 900">Director / PREA Coordinator Rupert Police Department Representative</p> <p data-bbox="280 938 719 972">Site Review / Observations:</p> <p data-bbox="280 983 357 1016">None</p> <p data-bbox="280 1055 459 1088">Provisions:</p> <p data-bbox="280 1126 1469 1485">115.334 (a) In accordance with Mini-Cassia Juvenile Detention Center Policy 16-7, staff members do not investigate allegations of sexual abuse. All investigations are conducted by outside agencies, therefore this section is N/A. Policy 16-7 states, "The Mini-Cassia Juvenile Detention Center will not conduct administrative or criminal investigations into allegations of sexual abuse/harassment occurring within the facility. All allegations of sexual abuse/harassment will immediately be referred to an outside agency with the legal authority and jurisdiction to investigate thoroughly and objectively all allegations, including third party and anonymous reports."</p> <p data-bbox="280 1541 1477 1910">115.334 (b) Because abuse investigations are the responsibility of the local law enforcement agency, Mini-Cassia Juvenile Detention Center staff are not required to have specialized training including techniques for interviewing juvenile 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. Random staff interviews showed staff are trained on and understand evidence preservation standards. Local law enforcement staff are trained in the areas necessary to conduct administrative and criminal sexual abuse investigations. This section is N/A.</p> <p data-bbox="280 1955 1461 2067">115.334 (c) Mini-Cassia Juvenile Detention Center did provide documented proof of specialized training eventhough the investigations are completed by outside agencies. Director Bodily completed the course "Investigating Sexual Abuse in a</p>

Confinement Setting: Advanced Investigations.”

115.334 (d) Auditor is not required to audit this provision.

Auditor Howell called the Ruppert City Police department and confirmed they are the responsible agency for administrative investigation related to abuse and neglect allegations. The department does have investigators appropriately trained to conduct investigations in accordance with PREA Standards.

The facility meets the requirements of standard 115.334 (a-d).

Corrective Action Findings: None

115.335	Specialized training: Medical and mental health care
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision:</p> <p data-bbox="280 454 770 488">Documents reviewed included:</p> <p data-bbox="280 499 1445 656">PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-2 Medical and Mental Health Care. Training Documentation</p> <p data-bbox="280 694 606 728">Interviews included:</p> <p data-bbox="280 739 1051 851">Director / PREA Coordinator Janet Loveland, LCPC Minidoka Memorial Hospital Emergency Room Director</p> <p data-bbox="280 889 719 922">Site Review / Observations:</p> <p data-bbox="280 934 355 967">None</p> <p data-bbox="280 1005 456 1039">Provisions:</p> <p data-bbox="280 1077 1477 1442">115.335 (a) The Mini-Cassia Juvenile Detention Center does not have on site medical and mental health practioners. All residents are transported off site for services, therefore this standard is not applicable. Janet Loveland, LCPC is utilized for mental health needs and Minidoka Memorial Hospital is utilized for medical needs. MCJDC policy does reference medical and mental health training requirements. It references mental healthcare practitioners who work regularly in the Center should be trained in their role in prevention, detection, physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations.</p> <p data-bbox="280 1480 1445 1637">115.335 (b) Mini-Cassia Juvenile Detention Center staff do not conduct forensic exams. The Director / PREA Coordinator confirmed this fact. The Emergency Room Director at the Minidoka Memorial Hospital confirmed via phone the trained and certified medical staff conduct the exams for the MCJDC.</p> <p data-bbox="280 1675 1437 1794">115.335 (c) Medical and mental health staff do receive PREA training, however because they are not employed by the County or work at the facility the facility is not held to this standard.</p> <p data-bbox="280 1832 1477 2033">115.335 (d) The Mini-Cassia Juvenile Detention Center Policy dictates that Medical and Mental Health practioners shall complete the necessary PREA training. There are no MCJDC medical and mental health staff employed by the agency. The hospital Emergency Room Director confirmed that their staff have received training in accordance with 115.331 and 115.332.</p>

Using information from interviews and documentation reviews (training records and policy reviews) the facility was determined to be in compliance with PREA Standard 115.335 (a-d).

Corrective Action Findings: None

115.341	Obtaining information from residents
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 383 1394 456">The following evidence was analyzed in the making of the compliance decision:</p> <p data-bbox="280 497 770 533">Documents reviewed included:</p> <p data-bbox="280 539 1378 656">PAQ Mini-Cassia County Juvenile Detention Center Policy 1-2: Intake Process 2023 Mini-Cassia Juvenile Detention Vulnerability Assessment Form</p> <p data-bbox="280 696 608 732">Interviews included:</p> <p data-bbox="280 739 671 855">Intake Screening Staff Director / PREA Coordinator Random Resident</p> <p data-bbox="280 893 719 929">Site Review / Observations:</p> <p data-bbox="280 936 1445 972">There was one intake/admission to observe during the on-site portion of the audit.</p> <p data-bbox="280 1048 456 1084">Provisions:</p> <p data-bbox="280 1090 1477 1709">115.341 (a) The Mini-Cassia Juvenile Detention Center PREA Policy 1-2 state that “the admission and orientation process is conducted immediately or within a reasonable amount of time following a juvenile’s placement in detention.” The facility intake staff perform screening that uses an objective screening instrument (MCJDC Vulnerability Assessment) to obtain information about the youth’s personal history and behavior to reduce the risk of sexual abuse by or upon another youth. Upon review of the screening instrument form Auditor Howell determined the screening instrument includes the elements required in provisions 115.341 a, b, and c. During discussions with intake staff and Director, Auditor Howell inquired about the admissions and assessment process. The staff interviewed consistently explained how the first thing youth do upon admission is spend time with the designated intake staff in the intake area of the building. PREA Auditor Howell toured the intake section of the building and observed one resident involved in the intake process. The area included private space for individual and confidential assessment meetings.</p> <p data-bbox="280 1749 1477 1906">The intake staff stated the facility continues to gather information periodically throughout the youth’s stay to reassess housing and supervision assignments based on incidents and periodically for residents who have an extended stay at the Detention Center.</p> <p data-bbox="280 1946 1445 2063">115.341 (b) The Mini-Cassia Detention Center policy states assessments are to be conducted using the objective screening instrument “immediately or within a reasonable period of time following a juvenile’s placement in detention.” PREA</p>

Auditor Howell reviewed 7 of 7 completed written youth assessments. In their interviews staff were able to explain the assessment process and what role the objective screening tool plays in the youth classification process. MCJDC uses the MCJDC Vulnerability Assessment results to determine their placement in the facility and if they have any special needs. Residents interviewed reported the screening and education process taking place the day they arrived at the facility.

115.341 (c) In accordance with the facility PREA Policy, the screening instrument, in use at MCJDC does include the following information:

- Prior sexual victimization or abusiveness
- Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore vulnerable to sexual abuse
- Current charges and offense history
- Age
- Level of emotional and cognitive development
- Physical size and stature
- Mental illness or mental disabilities
- Intellectual or developmental disabilities
- Physical disabilities
- The residents own perception of vulnerability
- Any specific information about individual residents that may indicate heightened need for supervision, additional safety precautions, or separation from certain residents

115.341 (d) Through a review of on-site documentation, staff interviews, resident interviews and an interview with the PREA Coordinator and the intake staff, Auditor Howell was able to ascertain that risk assessments were done in all eleven areas listed in 115.341 (c). This information was collected from conversations with the residents and a review of court records, case files, facility behavioral records, and other relevant documentation that is gathered upon the resident's arrival at the facility. The facility met the standard of this section.

115.341 (e) The Director / PREA Coordinator, and intake staff indicated during interviews that the information obtained during the initial, and any follow up screening is sensitive and treated as confidential, therefore the information has limited dissemination and access to the files is on a need to know basis. Employees are only permitted to view the protected information on a need-to-know basis. The facility secures the written records in a locked cabinet and a restricted password protected files for electronic records.

Based on the information learned in the interviews, document reviews, objective screening instrument demonstration, and the observations of the security in place to protect the confidential information, the facility is following the standards of this section.

	<p>The facility meets the requirements of standard 115.341 (a-e).</p>
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Corrective Action Findings: None

115.342	Placement of residents
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1362 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 488">Documents reviewed included:</p> <p data-bbox="280 501 1401 654">PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-4 Placement of Residents MCJDC Vulnerability Assessment Form - PREA Screening Instrument Form Resident Records</p> <p data-bbox="280 694 606 725">Interviews included:</p> <p data-bbox="280 739 887 896">Director / PREA Coordinator Random Residents Random Staff Staff Responsible for Risk Screening/Intake</p> <p data-bbox="280 936 721 967">Site Review / Observations:</p> <p data-bbox="280 981 683 1048">Intake and Assessment area Facility Tour</p> <p data-bbox="280 1133 459 1164">Provisions:</p> <p data-bbox="280 1178 1465 1456">115.342 (a) Mini-Cassia Juvenile Detention Center Policy 16-4 explains that the facility uses all information obtained during intake screening to make housing, bed, program, education, and work assignments for youth. The policy states, "The Mini-Cassia Juvenile Detention Center shall use information obtained pursuant to PREA 115.341 and subsequently make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse."</p> <p data-bbox="280 1469 1474 1792">The screening tool does provide an objective tool to aide in deciding housing, bed, program, education, and work assignments. The MCJDC Policy states, "When considering room assignments, staff shall refer to the Vulnerability Risk Assessment Instrument. Any resident with a score of 6 or higher in either the vulnerability score or sexually aggressive score, shall not be allowed roommates." Despite most resident rooms being single occupancy rooms, housing assignments are discussed anytime there is an incident and moving kids room assignment is considered an intervention to keep residents safe and free from violence and/or abuse.</p> <p data-bbox="280 1827 1484 2069">115.342 (b) Mini-Cassia Juvenile Detention Center Handbook allows residents being isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe. During the on-site phase of the audit PREA Auditor Howell walked freely through the facility and was given access to all areas as requested. At no time were isolation areas or isolation practices observed.</p>

If a youth were to be isolated for safety purposes, the reason would be documented along with the reason for no alternative to isolation shall be documented. Furthermore, page of the policy states, "During any times of isolation, juveniles shall not be denied daily large muscle exercise or and any legally required educational programming or special educational services. Juveniles in isolation shall receive daily visits from a medical or mental health provider. Juveniles shall also have access to other programs and work opportunities to the extent possible."

115.342 (c) The Director / PREA Coordinator explained the facility does not place LGBTQ residents on a special housing status/assignment or identification status as an indicator of vulnerability for sexual assault or harassment. Throughout both staff and resident interviews, no one reported that the Mini-Cassia Juvenile Detention Center had a LGBTQ resident for the past 12 months, therefore there were no bed assignment records or screening instruments to evaluate for this standard. The agency staff reported that if LGBTQ youth were in the program they would always refrain from considering lesbian, gay, bisexual, transgender, intersex, or questioning (LGBTQ) identification or status as an indicator or likelihood of being sexually abusive. Random staff interviews and a targeted resident interview revealed no special housing based on how a resident gender identifies. Sections 2,3,4,5,6 of the PREA Policy 16-4 support what was reported by facility personnel.

115.342 (d) The Random Staff, Intake Staff, Supervisors, Director / PREA Coordinator, and Chief Juvenile Officer reported no LGBTQ identifying residents in the facility during the past 12 months. Those staff interviewed stated the bed/ housing assignments are made on a case by case basis and as with all youth the assignment would be based on ensuring the residents health and safety, and whether placement would present management or security problems. During the on-site portion of the audit seven residents were in the facility and none were on a particular living unit or room assignment due to their risk of violence or being a victim of violence.

115.342 (e) The Mini-Cassia Juvenile Detention Center is designed for a short term length of stay, however some residents have resided at the facility longer. The Director / PREA Coordinator explained that long term stay residents are reassessed on a regular basis....at least every six months. During the audit there were no LGBTQ identifying residents at the facility. Regardless of who was at the facility during the audit, the practice of reassessing residents every six months meets the standard that transgender and intersex residents programming is reassessed at least twice per year.

115.342 (f) At the time of the audit there were no residents who identified as LGBTQ at the facility, therefore the auditor could not interview a resident in respect to them feeling like their own views were being considered in regard to housing assignments. The program's screening instrument (Vulnerability Assessment Form) used for all admissions does take into consideration the residents own views with respect to his or her own safety. Due to the number of open rooms and all of the existing residents residing in single occupancy rooms, Auditor Howell determined there was plenty of space to safely house and program juvenile residents.

115.342 (g) All residents shower separately from other youth and from the direct

observation of staff. This practice would allow transgender and intersex residents the opportunity to shower separately from other residents. During the facility tours PREA Auditor Howell observed the shower rooms in the residential living area. The shower areas are private and the shower practice and protocols are also. All direct care staff and residents, in individual interviews, explained the same shower process that afforded privacy to the resident showering. There is never a time more than one resident is permitted in the bathroom. All youth shower separately from other residents.

115.342 (h) Mini-Cassia Juvenile Detention Center PREA Policy requires the staff document any student isolation or separation including 1. The basis for the facilities concern for the residents safety. 2. The reason why no alternative means of separation can be arranged. MCJDC policy also states any placement and programming assignments for each transgender or intersex resident shall be reassessed every week to review any threats to safety experienced by the resident.

115.342 (i) According to the Director and the supervisory staff, in a case of a resident that is isolated as a last resort when less restrictive measures were inadequate the facility staff would review the need for continued separation from others on a weekly basis (meeting the maximum 30 day standard). The Director confirmed the facility utilizes single rooms and does not use isolation for the protection of residents at risk of sexual victimization. As a result, the facility meets the intent of this standard.

Based on the information learned in the interviews, document reviews, and the observations of the auditor, Mini-Cassia Juvenile Detention Center is in compliance with standard 115.342 (a - i).

Corrective Action Findings: None

115.351	Resident reporting
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 488">Documents reviewed included:</p> <p data-bbox="280 501 1458 694">PAQ Mini-Cassia Detention Center PREA Policy 16-5 Reporting Incidents of Sexual Abuse or Sexual Harassment. Detention Center PREA Brochure Zero Tolerance Posters</p> <p data-bbox="280 734 606 766">Interviews included:</p> <p data-bbox="280 779 673 891">Director / PREA Coordinator Intake Staff Random Residents</p> <p data-bbox="280 931 721 963">Site Review / Observations:</p> <p data-bbox="280 976 852 1008">Intake assessment and orientation area.</p> <p data-bbox="280 1048 488 1079">Facility Tour:</p> <p data-bbox="280 1093 1458 1285">115.351 (a) Mini-Cassia Juvenile Detention Center provides multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff including staff neglect or violation of responsibilities that may have contributed to such incidents. The Mini-Cassia Juvenile Detention Center Policy 16-5 lists the following options to report:</p> <p data-bbox="280 1326 1458 1697">Report to the National Child Abuse and Neglect Hotline Notify any staff verbally or in writing Report to a third party (policy allows third parties to assist residents in making reports) Report in writing Report verbally Reporting anonymously and in private is permitted Reporting staff misconduct without having to first attempt to resolve the complaint with any detention staff.</p> <p data-bbox="280 1738 1458 1975">Auditor Howell observed many posters with the hotline phone number in areas residents had access to. Auditor Howell tested phone number and confirmed the number provided access to confidential resources outside the facility. The areas where the posters were present included living units, classroom, facility entrance, conference room, common area and hallways. Also observed were grievance boxes where youth could put a note asking to speak with someone.</p> <p data-bbox="280 2016 1458 2092">In Random resident interviews, 7 of 7 youth could explain at least two ways to report sexual abuse and/or harassment. 7 of 7 explained they would tell a staff or</p>

their parents.

115.351 (b) Mini-Cassia Juvenile Detention Center provides at least one way for residents to report sexual abuse or harassment accepts verbal and written reports made anonymously or by third parties and promptly documents verbal reports. Page 25 states, "Staff shall accept reports of a sexual nature made verbally, in writing, anonymously, and from third parties." 100% of the staff reported in their individual interviews that they believed they could report in more than one way.

The Child Abuse Hotline 1 (800) 422-4453 was observed posted throughout the facility. This phone number was tested and confirmed two by Auditor Howell. The Hotline operator confirmed the Hotline abuse and neglect procedures for taking and processing a call from the Mini-Cassia Juvenile Detention Center. The Hotline is available 7 days per week and 24 hours per day. Anonymous calls are accepted. Also posted was the phone number for the Minidoka Sheriff's Department 434-2320 and the Detention Center Director 436-7199.

7 of 7 residents gave examples of "how" they could report to a Third Party. Responses included call the Hotline using the phone in the living unit, write on a grievance form, tell a family member, tell their lawyer, and tell a trusted staff member.

The Mini-Cassia Regional Juvenile Detention Center does not detain residents solely for the civil immigration purposes. However, the PREA Policy states residents detained solely for civil immigration purposes would be provided information on how to contact relevant consular officials and the Department of Homeland Security.

115.351(c) In accordance with Mini-Cassia Detention Center PREA Policies, any staff member shall accept reports of sexual abuse and sexual harassment from a detained juvenile or a third party, whether verbally or in writing, and shall promptly document any verbal reports. This was evident in both the staff and resident responses during the in-person interviews. When asked about documenting verbal reports of sexual abuse and sexual harassment all of the non-supervisory staff responded that they would immediately share the report with their supervisor and once the residents had been determined safe (i.e. separated from the alleged aggressor and free from retaliation) the staff would document what they were initially told. Facility administrators also confirmed the process for accepting allegations from residents as well as third parties.

115.351 (d) The Mini-Cassia Juvenile Detention Center provides residents access to grievance forms and writing instruments to privately make a written report. Auditor Howell observed grievance forms available and 7 of 7 residents reported access to writing instruments upon request. In interviews 7 of 7 residents reported that they believed they could file a confidential grievance or allegation of sexual abuse or harassment.

The Mini-Cassia Juvenile Detention Center staff can submit reports of allegations of sexual abuse or harassment of residents by submitting a report to the Director by calling the Child Abuse Hotline. The staff interviews revealed the staff understand their reporting responsibility, the multiple reporting avenues they have, and what

the PREA expectations are.

115.351 (e) The Mini-Cassia Juvenile Detention Center has established procedures for staff to privately report sexual abuse and sexual harassment of residents. The procedures are listed on page 1 section 1 of the procedures of the PREA Policy 16-5 and include reporting:

1. Written Reports
2. Verbal Reports
3. Anonymous Reports
4. Third Party Reports
5. Verbal reports being documented and forwarded to the Director.

During staff interviews all interviewees pointed out the posted hotline phone number as an example of a way to privately and confidentially report. Staff also discussed learning the process in their initial and annual PREA training.

Based on the information learned in the resident and staff interviews, document reviews, and the observed facility postings, the facility meets the requirements of standard 115.351 (a - e).

Corrective Action Findings: None

115.352	Exhaustion of administrative remedies
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision:</p> <p data-bbox="280 456 772 492">Documents reviewed included:</p> <p data-bbox="280 497 1474 654">Mini-Cassia Juvenile Detention Center PREA Policy 16-10 - Submission of Grievances Alleging Sexual Abuse Mini-Cassia County Regional Juvenile Detention Center Resident Handbook & Exam Grievance Forms</p> <p data-bbox="280 694 606 730">Interviews included:</p> <p data-bbox="280 734 673 891">Director / PREA Coordinator Administrative Assistant Random Residents Random Staff</p> <p data-bbox="280 931 721 967">Site Review / Observations:</p> <p data-bbox="280 1003 520 1039">Grievance Boxes</p> <p data-bbox="280 1079 459 1115">Provisions:</p> <p data-bbox="280 1120 1474 1738">115.352 (a) This standard does apply to Mini-Cassia Juvenile Detention Center because the facility does have administrative procedures to address resident grievances regarding sexual abuse and harassment. Auditor Howell confirmed through a review of facility policies, the Resident Handbook, and interviews that grievances regarding sexual abuse and harassment are immediately treated as a PREA allegation and the appropriate steps of reporting and follow up are implemented. A supervisor was asked, "What would happen if a written grievance, related to sexual abuse or harassment, was found in a grievance box?" Their reply was, "we would treat it like any other PREA allegation and follow the protocols." Youth are educated on PREA and the Grievance procedures upon admission to the facility. The Director (or designee) reviews all Grievances within 24 hours of them being filed and informs the resident of the outcome of her or his investigation. In individual interviews, residents confirmed knowledge of the Grievance procedure and how to put a written complaint in the grievance box. 7 of 7 residents claimed to trust the process.</p> <p data-bbox="280 1778 1474 2060">115.352 (b) Auditor Howell found no evidence of timelines or restrictions on grievances for reporting sexual abuse or sexual harassment. Per policy and found in staff and resident interviews, youth are not required to use any particular reporting manner (i.e. informal grievance, internal problem solving, or making it mandatory to address the staff they are reporting). A review of the resident rights, Juvenile Handbook, and Policy 16-10 showed no evidence of limiting their legal reporting rights of a juvenile in the Mini-Cassia Detention center.</p>

115.352 (c) In accordance with Mini-Cassia Juvenile Detention Center Handbook policy and as confirmed in the resident and staff interviews, a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. Furthermore, there is no time limit imposed on filing a sexual abuse or harassment complaint at MCJDC.

7 of 7 residents confirmed they could file a complaint against a staff member without the grievance going to the staff in question. Auditor Howell received responses such as: I would tell my Dad, I would tell my lawyer, I would tell the supervisor, I would tell (trusted staff name).

115.352 (d)

1. All grievances and allegations related to sexual abuse and harassment are referred to the Hotline and the Police Department for criminal investigations. During a telephone conversation, Law Enforcement acknowledged the expected PREA guidelines and said they complete their portion of the investigation as soon as possible. This would allow the Mini-Cassia Juvenile Detention Center to issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance.

2. The Mini-Cassia Juvenile Detention Center PREA Coordinator acknowledged that if they determined that the 90-day timeframe is insufficient they would refer to the PREA standards and make an appropriate decision and claim an extension of time and notify the resident in writing of any such extension and provide a date by which a decision will be made. Through interviews of residents, interviews of staff, and a review of the grievances of the past 12 months Auditor Howell found zero allegations or grievances related to sexual abuse or harassment.

3. Although unlikely, if all of the time limits of 1 and 2 of this section (d) are exhausted and the resident does not receive a written response the youth could contact their lawyer, guardian, Law Enforcement or Child Abuse Hotline. Also, the MCJDC could claim an extension of time, up to 70 days, to complete the investigation if the normal time is insufficient to make an appropriate decision. If an extension was necessary, the Director would notify the resident in writing.

115.352 (e) The Mini-Cassia Juvenile Detention Center accepts verbal and written reports made anonymously or by third parties and promptly documents verbal reports.

1. According to Mini-Cassia Juvenile Detention Center Handbook, verbal reports received residents, anonymous reports and from third party reports shall be received and documented on an Incident Report form and Shift Notes.

2. The Director / PREA Coordinator, and Supervisors explained, third parties are permitted to file such requests on behalf of residents.

3. If a resident were to decline to have a third-party request processed on his or her behalf, the Mini-Cassia Juvenile Detention Center staff would document the resident's decision.

4. Mini-Cassia Juvenile Detention Center accepts third party allegations and grievances from anyone, this includes the parent or legal guardian of a juvenile. the

facility does not require such a grievance be conditioned on the juvenile agreeing to having the request filed on his/her behalf.

5. The Director made it clear all allegations of sexual abuse and harassment are taken seriously and followed up per PREA standards. No grievances would be conditioned upon the juvenile agreeing to have a request filed on his behalf.

115.352 (f)

1. The Mini-Cassia Juvenile Detention Center has confidential grievance boxes and has open and good communication between the staff and residents. PREA Auditor Howell observed residents using this avenue to talk to staff in private away from other residents. If a resident informally asked to speak with staff, the staff would either stop what they were doing or finish what they were doing and return to speak with the youth. Additionally, a resident can call the Child Abuse Hotline at anytime. These procedures meet the standard of having an established procedure for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse.

2. The Mini-Cassia Juvenile Detention Center is a small facility in a small Idaho town. The administrator maintains constant communication with the direct care staff, supervisors and residents. Any grievance or complaint alleging a resident is subject to a substantial risk of imminent sexual abuse, in accordance with facility policy, the matter would be immediately reviewed at the highest level of the Detention Administration and forwarded to Law Enforcement for investigative processing.

3. After receiving an emergency grievance, either the Director or designee would provide an initial response within 24 hours (meeting the 48-hour standard).

4. Auditor Howell found no evidence of any grievances alleging substantial risk of imminent sexual abuse filed in the last 12 months, therefore there were no grievances to evaluate the time it took for the initial response.

5. Policy 16-10 does address emergency grievances alleging that a resident is subject to a substantial risk of imminent sexual abuse would be reviewed for immediate corrective action and that a final agency decision would be issued within 5 days. (See page 2, #11)

6. Auditor Howell found no evidence of any grievances alleging substantial risk of imminent sexual abuse filed in the last 12 months, therefore there were no timelines to evaluate against the 5 day standard.

115.352 (g) The Mini-Cassia Juvenile Detention Center may discipline a resident for filing a grievance related to alleged sexual abuse if the resident filed the grievance in bad faith. Auditor Howell found zero grievances filed over the past 12 months alleging sexual abuse or harassment. Throughout facility staff interviews, outside agency interviews, and document reviews Auditor Howell found zero grievances filed for the purpose of reporting sexual abuse or harassment. In the interviews the residents all reported feeling safe at the facility and that they could file an allegation without fear of retaliation. The random staff interviews revealed the staff were aware of the resident and third part grievance procedures. The grievance procedure includes avenues for filing an appeal.

As a result of the auditor observations while on campus, reviews of resident grievances, and interviews of staff and residents this auditor has

determined the facility meets the requirements of standard 115.352 (a - g).

Corrective Action Findings: None

115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included - Mini-Cassia Juvenile Detention Center PREA Policy 16-21 – Sexual Response Protocol MOU between MCJDC and Janet Loveland Mini-Cassia Juvenile Detention Center PREA Policy 3-1 Juvenile Rights... PREA Brochure PREA Posters Facility Schematics</p> <p>Interviews included: Director Intake Staff Supervisory Staff Random Residents</p> <p>Site Review / Observations: Telephone locations and resident ability to make confidential calls. Rooms provided for confidential resident meetings with lawyers, advocates, and parents.</p> <p>115.353 (a) The Mini-Cassia Juvenile Detention Center Policy outlines how all residents have access to outside confidential support services related to sexual abuse and harassment. The facility provides information through living unit and common area building postings that include mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations. 7 of 7 residents interviewed confirmed they believed a call to outside support services would be private and confidential. When interviewed, the residents confirmed they could ask for privacy when speaking with their attorney or an outside advocacy service. 10 random staff and 2 administrative staff interviewed confirmed residents were provided private and confidential phone calls upon request.</p> <p>Auditor Howell observed and called to confirm the following phone number posted in the resident living areas, dining room, and classrooms – National Child Abuse Hotline 1-800-422-4453.</p> <p>The facility also provides residents with information about outside victim advocate Janet Loveland for emotional support services. Janet Loveland reported no calls on record from the Mini-Cassia Juvenile Detention Center in the past 12 months. The Mini-Cassia Juvenile Detention Center does not provide services for youth detained solely for civil immigration purposes, therefore no postings or brochures include contact information for immigration services.</p>

115. 353 (b) 7 of 7 residents reported during their interviews that upon admission they received information on how to access outside confidential support services and that they believed they could make confidential calls upon request. 7 of 7 residents, one intake staff, and the Director confirmed the residents are informed of the mandatory reporting rules, governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law. Auditor Howell observed the PREA posters with toll free numbers to access confidential support services. Auditor Howell tested the phone numbers and confirmed the process was established and working. 10 of 10 random staff and 2 of 2 administrative staff confirmed in their respective interviews that the resident phone calls could be made in a confidential manner upon request.

115.353 (c) LCPC Janet Loveland provides the Mini-Cassia County Juvenile Detention Center residents with confidential emotional support services related to sexual abuse and harassment. Services are free of charge and can be provided in person or by phone. Auditor Howell confirmed the services are available and applicable to PREA Standard 115.353 by calling and speaking with Janet Loveland and reviewing the MOU between MCJDC and Janet Loveland. Sections 1.01, 1.02, and 1.04 are specifically related to 115.353.

115.353 (d) In accordance with facility PREA Policy 3-1 Juvenile Rights, Juvenile Responsibilities, Juveniles Working in Detention the Mini-Cassia County Regional Juvenile Detention Center, Policy 3-1 #7 & #8, states MCJDC does provide residents with reasonable and confidential access to their attorneys or legal representation, parents, and legal guardians. Residents are informed of this right upon admission. Intake staff explained residents are verbally told to request a call or meeting. The Resident Handbook explains the residents have a right to visit in private with their lawyer. In the interviews 7 of 7 residents all reported feeling safe at the Juvenile Detention Center and that they could make confidential contact with legal representatives or other outside service resources to receive emotional support services as needed.

The documentation reviewed, information received through interviews, and what was observed on tour of the facility led Auditor Howell to determine the facility meets the requirements of standard 115.353 (a - d).

Corrective Action Findings: None

115.354	Third-party reporting
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 772 488">Documents reviewed included:</p> <p data-bbox="280 499 1406 696">PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-5 – Reporting Incidents of Sexual Abuse or Sexual Harassment. PREA Zero Tolerance Posters MOU between MCJDC & Janet Loveland</p> <p data-bbox="280 734 608 768">Interviews included:</p> <p data-bbox="280 779 671 891">Director / PREA Coordinator Random Residents Random Staff</p> <p data-bbox="280 929 719 963">Site Review / Observations:</p> <p data-bbox="280 974 507 1050">Facility postings Provisions:</p> <p data-bbox="280 1088 1426 1243">115.354 (a) The Mini-Cassia Juvenile Detention PREA Policy 16-5 describes the procedures to receive and for making a 3rd party report of sexual abuse and harassment on behalf of a youth. The procedures are listed in the resident PREA education materials.</p> <p data-bbox="280 1281 1469 1480">Random staff interviews revealed the staff are aware of the Third-Party reporting expectations. 10 of 10 staff reported they would accept a Third-Party report and follow the facility procedures. During interviews, all of the residents explained there was someone outside the facility they could report an allegation of sexual abuse or sexual harassment.</p> <p data-bbox="280 1518 1461 1682">When contacted by Auditor Howell, the Hotline staff explained they would accept a Third-Party report of sexual abuse or harassment. Auditor Howell also observed the posting of the 3rd party reporting procedure posted on wall hangings in the visitor entrance to the facility.</p> <p data-bbox="280 1720 1426 1839">Through gathering information in interviews, observing the on-site wall hangings, and reviewing related policies it was determined the facility meets the standards listed in 114.354.</p> <p data-bbox="280 1877 807 1910">Corrective Action Findings: None</p>

115.361	Staff and agency reporting duties
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 488">Documents reviewed included:</p> <p data-bbox="280 497 1390 654">PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-5: Reporting Incidents of Sexual Abuse or Sexual Harassment Facility PREA Postings</p> <p data-bbox="280 694 606 725">Interviews included:</p> <p data-bbox="280 734 751 976">Director / PREA Coordinator Random Residents Random Staff Hotline Representative Law Enforcement Representative Intake Staff</p> <p data-bbox="280 1016 954 1048">Site Review / Observations: Facility Postings</p> <p data-bbox="280 1088 459 1120">Provisions:</p> <p data-bbox="280 1128 1469 1415">115.361 (a & b) Mini-Cassia Juvenile Detention Center PREA Policy 16-5 clearly states, MCJDC “will ensure that incidents or suspected incidents of physical abuse, sexual abuse, sexual harassment, or retaliation for reporting sexual abuse or sexual harassment are reported to the appropriate agency for proper investigation.” All staff interviewed acknowledged their responsibilities as mandated child abuse reporters. All staff could describe the PREA training they completed and the intent of the PREA standards and Child Abuse reporting laws.</p> <p data-bbox="280 1456 1461 1742">115.361 (c) Apart from reporting to designated supervisors or officials and designated State or local services agencies, according to the Mini-Cassia Juvenile Detention Center PREA Policy 16-5 #9, staff are prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. Staff interviews confirmed this standard on confidentiality is understood at MCJDC.</p> <p data-bbox="280 1783 1477 2069">115.361 (d) The Mini-Cassia Juvenile Detention Center does not have full time medical and mental health staff. The services are provided by outside medical practioners at the hospital and through Janet Loveland. Through an interviews Auditor Howell learned both the mental health and medical practitioners understand they are required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws. The medical staff and</p>

the mental health practitioners are trained on their duty to report.

115.361 (e) In accordance with the MCJDC PREA Policy, upon receiving any allegation of sexual abuse or neglect, the Director or designee shall call the Minidoka County Prosecuting Attorney, Minidoka Sheriff's Department, and/or the Rupert City Police for complete investigation . During interviews, the facility Director explained he would notify the alleged victims parents or legal guardians and his or her attorney. If the juvenile court retains jurisdiction of the alleged victim the assigned court representative is notified by the facility Director. Though the PREA Audit interview process, Auditor Howell learned the Director, Administrative Assistant, and line level staff do have a good understanding of the mandated reporting processes.

115.361 (f) In the past 12 months, there were zero allegations of sexual abuse that required a call to the investigative authorities. Interviews of key staff and a review of related policy demonstrate the facility is aware of the requirements to immediately report all allegations of sexual abuse and sexual harassment, including third party anonymous reports, to law enforcement and outside advocates.

Based on the information found through documentation reviews, interviews, and facility postings the facility meets the requirements of standard 115.361 (a-f).

Corrective Acton Required: None

115.362	Agency protection duties
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 488">Documents reviewed included:</p> <p data-bbox="280 497 1337 613">PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-6: Resident and Staff Protection</p> <p data-bbox="280 654 606 685">Interviews included:</p> <p data-bbox="280 694 673 810">Director / PREA Coordinator Supervisory Staff Random Staff</p> <p data-bbox="280 851 721 882">Site Review / Observations:</p> <p data-bbox="280 891 507 927">Facility Postings</p> <p data-bbox="280 967 459 999">Provisions:</p> <p data-bbox="280 1039 1465 1527">115.362 (a) Interviews of random staff as well as administrators revealed 10 of 10 random staff of Mini-Cassia Juvenile Detention Center staff understand that when anyone learns that a resident is subject to a substantial risk of imminent sexual abuse, they must take immediate action to protect the resident. The Juvenile Detention Center Policy 16-6 page 1 supports this standard (115.362). All staff interviewed discussed separating a resident that was at risk. Because the facility does utilize single room occupancy, separation procedures for alleged victims and perpetrators can be easily achieved. If the alleged perpetrator is a staff, he/He would be suspended from working directly with the residents until the investigation is complete. The Mini-Cassia Juvenile Detention Center process removes the person (staff or resident) who may e causing the imminent risk of sexual abuse or harassment.</p> <p data-bbox="280 1612 1471 1809">During resident interviews the residents expressed trust in the facility reporting and response process. 7 of 7 residents reported feeling safe in the facility. In interviews, staff were able to explain the process of receiving a report, making a report, separating the alleged victim from the perpetrator, protecting evidence, and documenting everything.</p> <p data-bbox="280 1850 1433 1966">Based on information received from interviews, documentation reviews, and public postings, the facility meets the requirements of standard 115.362.</p> <p data-bbox="280 2007 813 2038">Corrective Action Required: None</p>

115.363	Reporting to other confinement facilities
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision:</p> <p data-bbox="280 465 770 499">Documents reviewed included:</p> <ol data-bbox="280 551 1374 663" style="list-style-type: none"> 1. PAQ 2. Mini-Cassia Juvenile Detention Center PREA Policy 16-6: Resident and Staff Protection. <p data-bbox="280 719 608 752">Interviews included:</p> <ol data-bbox="280 759 708 875" style="list-style-type: none"> 1. Director / PREA Coordinator 2. Random Staff 3. First Responder Staff <p data-bbox="280 927 719 960">Site Review / Observations:</p> <ol data-bbox="280 967 392 1001" style="list-style-type: none"> 1. None <p data-bbox="280 1039 459 1072">Provisions:</p> <p data-bbox="280 1079 1473 1406">115.363 (a) In accordance with Policy 16-6 #7, upon receiving an allegation that a resident was sexually abused while confined at another facility, the MCJDC Director will notify the head of any other facility upon which the alleged abuse occurred. The Director will document the allegation on an incident report and forward it to the Minidoka County Sheriff's Department or the Rupert Police Department for further investigation. In addition, a child protection referral shall also be submitted by contacting the Idaho Department of Health and Welfare, Family and Child Services Division.</p> <p data-bbox="280 1458 1422 1574">The MCJDC Director, and all staff interviewed, reported not receiving any allegations, in the past 12 months, that a resident was abused while confined at another detention facility.</p> <p data-bbox="280 1626 1449 1783">115.363 (b) The MCJDC Director reported he would initiate the notification process immediately, thus meeting the standard of no later than 72 hours after receiving the allegation. There were no allegations or investigations to review against this standard.</p> <p data-bbox="280 1834 1449 1951">115.363 (c) MCJDC PREA Policy 16-6 adequately covers documentation of all PREA allegations. There were no allegations or investigations to review against this standard.</p> <p data-bbox="280 2002 1406 2078">115.363 (d) Trent Bodily, Facility Director acknowledged when he receives such notification he is responsible to ensure that the allegation is investigated in</p>

accordance with these standards.

The facility meets the requirements of standard 115.363 (a-d).

Corrective Action Required: None

115.364	Staff first responder duties
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision:</p> <p data-bbox="280 465 770 501">Documents reviewed included:</p> <ol data-bbox="280 551 1433 667" style="list-style-type: none"> 1. PAQ 2. Mini-Cassia County Juvenile Detention Center PREA Policy 16-21: Sexual Abuse Response Protocol <p data-bbox="280 716 606 752">Interviews included:</p> <ol data-bbox="280 757 708 873" style="list-style-type: none"> 1. Director / PREA Coordinator 2. Random Staff 3. First Responder Staff <p data-bbox="280 922 719 958">Site Review / Observations:</p> <ol data-bbox="280 963 392 999" style="list-style-type: none"> 1. None <p data-bbox="280 1048 459 1084">Provisions:</p> <p data-bbox="280 1133 1481 1505">115.364 (a) According to the PREA Policy 16-21, upon learning of an allegation that a resident was sexually abused, the first staff member to respond to the report is required to separate the alleged victim and abuser and then preserve and protect the crime scene. Upon learning of an allegation that a resident was sexually abused, the first staff member to respond to the report is required to request that the alleged victim and abuser do not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence.</p> <p data-bbox="280 1554 1449 1630">The above practices were supported in the First Responder interviews where 10 of 10 random staff responded in accordance with the guidelines.</p> <p data-bbox="280 1680 1481 1921">115.364 (b) The Mini-Cassia County Juvenile Detention Center staff are all trained to respond in the same manner. All responders are trained to separate the alleged victim from imminent risk, request that the alleged victim not take any actions that could destroy physical evidence, and then report the incident per policy. 2022 training was conducted on June 1, 2022. In interviews all staff reported completing a refresher in the last 30-60 days conducted by the Facility Director Trent Bodily.</p> <p data-bbox="280 1971 1449 2087">There were zero allegations or investigations into incidents of sexual abuse in the past 12 months, therefore there were no related reports to review for compliance with this standard. The evidence used to determine compliance with this standard</p>

was the PREA policy review, student education materials, and first responder staff interviews.

The facility meets the requirements of standard 115.364.

Corrective Action Required: None

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision:</p> <p>Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-21: Sexual Abuse Response Protocol</p> <p>Interviews included: Director / PREA Coordinator Random Staff First Responder Staff</p> <p>Site Review / Observations: None</p> <p>Provisions:</p> <p>115.365 (a) The Mini-Cassia Juvenile Detention Center Sexual Abuse Response Protocol provides specific guidelines for a staff’s response to allegations of sexual abuse and sexual harassment. The plan includes each position's role and specific action they are expected to take including first responders, mental health staff, administrators, and leadership. The Director / PREA Coordinator explained the facilities coordinated response plan. In interviews, the Director, random staff, and First Responders could also articulate the process.</p> <p>Based on the interview responses received and the documentation reviewed, the facility was determined to meet the requirements of standard 155.365.</p> <p>Corrective Action Required: None</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Handbook Staff files</p> <p>Interviews included: Director / PREA Coordinator (with Human Resources Coordinator duties) Random Staff</p> <p>Site Review / Observations: None</p> <p>Provisions: 115.366 (a) There are no agreements in place that would prohibit the Mini-Cassia Juvenile Detention Center from removing staff alleged to be involved in sexual abuse or sexual harassment. Juvenile Detention Center policy states alleged sexual abusers or harassers can be removed from contact with residents pending investigations and/or final outcomes, including discipline that is warranted, related to allegations of sexual abuse and harassment.</p> <p>Interviews of the Director / PREA Coordinator (who has Human Resources responsibilities), and Random Staff provided no evidence that the facility participates in a collective bargaining processes that would limit PREA compliance.</p> <p>115.366 (b) The auditor is not required to audit this provision.</p> <p>Through staff interviews and file audits, PREA Auditor Howell determined the facility meets the requirements of standard 115.366.</p> <p>Corrective Action Required: None</p>

115.367	Agency protection against retaliation
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <hr/> <p data-bbox="280 383 1353 456">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 499 1477 651">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-6: Resident and Staff Protections Against Retaliation PAQ Staff files</p> <p data-bbox="280 694 606 728">Interviews included: Director Supervisory Staff Random Staff</p> <p data-bbox="280 891 719 925">Site Review / Observations: None</p> <p data-bbox="280 1003 459 1037">Provisions:</p> <p data-bbox="280 1048 1477 1330">115.367 (a) The Mini-Cassia County Juvenile Detention Center has a policy that calls for designated staff provide protection against retaliation to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The Director is the staff designated to monitoring retaliation against staff or residents that report sexual abuse or harassment. The designee on each shift is the Detention Juvenile Officer assigned.</p> <p data-bbox="280 1341 1477 1415">Staff members that would designated as responsible for monitoring retaliation were Trent Bodily , Sheryl Brown, Colleen Howard, Matt Quinn, and Cheryle Whitesell.</p> <p data-bbox="280 1453 1477 1906">115.367 (b) The agency employs multiple protection measures for staff and residents that fear retaliation for reporting sexual abuse or sexual harassment. Measures include room changes, removal of alleged abuser from contact with the alleged victim, and emotional support services, for youth or staff who fear retaliation. During the on-site audit, PREA Auditor Lawrence Howell asked the Supervisor reasons that would necessitate the movement of residents from one room to another. The supervisor explained how the staff would discuss and agree on room moves to avoid incidents based on potential (out of facility) conflicts among residents. This was not sexual abuse or sexual harassment related; however, it was a demonstration that the facility did implement proactive protection/intervention measures to avoid negative incidents among the residents.</p> <p data-bbox="280 1944 1477 2063">115.367(c, d, e) All facility staff are responsible for protecting staff and residents who report sexual abuse and sexual harassment. In accordance with facility policy 16-6 page 1 #3 for at least 90 days or beyond, based on the continuing need, the</p>

Director and facility shift supervisors are tasked with protecting residents from retaliation. The person charged with monitoring the staff and residents for signs of retaliation including items such as disciplinary reports, housing or program changes, staff reassignments, and negative performance reviews. This Director and Shift Supervisors are expected to conduct periodic status checks / interviews with the alleged victim and act promptly to remedy any retaliation.

115.367 (f) Auditor is not required to audit this provision.

Because there were zero reported allegations of sexual abuse or sexual harassment during the last 12 months, Auditor Howell was unable to review documentation which would prove or disprove compliance with this standard. Interviews of the key staff designated as those responsible for monitoring for retaliation resulted in the individuals interviewed being able to explain procedures they would employ to protect residents.

As a result of the evidence considered (interviews, policy review, and staff file reviews), the facility meets the requirements of this standard 115.367 (a-f).

Corrective Action Required: None

115.368	Post-allegation protective custody
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 770 488">Documents reviewed included:</p> <p data-bbox="280 497 1326 696">Mini-Cassia Juvenile Detention Center Policy 16-6: Placement of Residents PAQ Facility Schematic Incident reports Resident Files</p> <p data-bbox="280 734 606 768">Interviews included:</p> <ol data-bbox="280 777 805 976" style="list-style-type: none"> 1. Director 2. PREA Coordinator 3. Medical and Mental Health Staff 4. Random Staff 5. Random Residents <p data-bbox="280 1014 719 1048">Site Review / Observations:</p> <p data-bbox="280 1057 464 1090">Campus tour</p> <p data-bbox="280 1128 458 1162">Provisions:</p> <p data-bbox="280 1200 1453 1400">115.368 (a) Mini-Cassia Juvenile Detention Center does not have or implement the use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342. As observed on the facility tour, the facility does utilize segregated housing for intake or disruptive behavior only.</p> <p data-bbox="280 1438 1481 1765">As reported on the PAQ, given as responses during staff and student interviews, and discovered during living unit log reviews; In the past 12 months the number of residents who allege to have suffered sexual abuse who were placed in isolation is zero. The number of residents who allege to have suffered sexual abuse who were placed in isolation who have been denied daily access to large muscle exercise, and/or legally required education, or special education services is zero. The average period of time residents who allege to have suffered sexual abuse who were held in isolation to protect them from sexual victimization is zero.</p> <p data-bbox="280 1803 1453 2089">Evidence considered in making a compliance decision included the following: Documentation reviewed to determine compliance included incident reports and resident case files to determine if isolation is used at all at the Mini-Cassia Juvenile Detention Center. Interviews included administrators, random staff, and residents. Observations included the designated isolation area. Auditor Howell could not find evidence that isolation is used to protect victims of sexual abuse or harassment at the facility.</p>

As a result of the evidence considered, the facility meets the requirements of standard 115.368.

Corrective Action Required: None

115.371	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included - Mini-Cassia Juvenile Detention Center PREA Policies: - 16-7: Criminal and Administrative Investigations - 16-21 Sexual Abuse Response Protocol - 16-5 Reporting Incidents of Sexual Abuse or Sexual Harassment. Staff Files</p> <p>Interviews included:</p> <p>Director / PREA Coordinator Random Staff Law Enforcement Representative</p> <p>Site Review / Observations: N/A</p> <p>Provisions:</p> <p>115.371 (a) Policy 16-7: Criminal and Administrative Investigations states, “ The Mini-Cassia Juvenile Detention Center will not conduct administrative or criminal investigations into allegations of sexual abuse/harassment occurring within the facility. All allegations of sexual abuse/harassment will immediately be referred to an outside agency with the legal authority and jurisdiction to investigate thoroughly and objectively all allegations, including third party and anonymous reports.”</p> <p>When interviewed the Director / PREA Coordinator explained that when an allegation is made, they first ensure the alleged residents involved are safe and the potential crime scene is not disturbed. They then call local law enforcement as soon as possible. When asked specifically how long it takes to initiate an investigation Director Bodily replied, “immediately...asap.”</p> <p>For criminal and administrative investigations at the Mini-Cassia Juvenile Detention Center, the investigating authorities are the Rupert Police Department and the Minidoka Sheriff’s Department, The facility Director / PREA Coordinator said anonymous or third party allegations would not be treated any different than any other allegation of sexual abuse or harassment. There were no investigation documents to review because there were no allegations of sexual abuse or harassment reported in the past 12 months.</p> <p>115.371 (b & c) The Mini-Cassia Juvenile Detention Center refers all investigations</p>

related to sexual abuse and sexual harassment to law enforcement. When contracted by Auditor Howell, law enforcement confirmed the departments investigative responsibilities at Mini-Cassia Juvenile Detention Center. From discussions with the police department representatives, Auditor Howell was able to confirm the investigation process includes;

Investigators are required to stay current on sexual assault training techniques and relevant information.

Training includes:

- Techniques for interviewing juvenile sexual abuse victims.
- Proper use of Miranda and Garrity warnings.
- Sexual abuse evidence collection in confinement settings.
- The criteria and evidence required to substantiate a case for administrative or prosecution referral.

The investigation process, including gathering of evidence.

Investigation relate to juveniles are initiated immediately upon receiving a report.

Third party or anonymous reports of sexual abuse or sexual harassment are not handled any different.

The District Attorney's office is consulted throughout all investigations in case prosecutions are the end result of the investigations.

During an interview of the hospital emergency room personel, they explained they work closely with the investigators from the Police Department during sexual abuse investigations involving juveniles. This includes training the investigators on evidence preservation and collaborating on individual cases involving alleged sexual assault.

115.371(d) Mini-Cassia Juvenile Detention Center management reported in separate interviews that the facility administrators would refrain from terminating an investigation solely because the source of the allegation recants the allegation, or the alleged abuser or victim departs from the facility. Because the facility did not have any closed investigations reported in the past 12 months, Auditor Howell could not ascertain a reason to determine non-compliance with this provision.

Additionally, the police department does not terminate investigations solely because the source of the allegation recants the allegation.

115.371 (e) The facility reported zero allegations of sexual abuse or harassment, therefore there were zero investigations for the auditor to review. The Mini-Cassia Juvenile Detention Center management staff did report they would do nothing related to an on-going investigation unless it was pre-approved or requested by the investigating agency. This would include compelling interviews. Prior to taking steps that will be included in a criminal prosecution, the policy department consults the District Attorney Office throughout all sexual assault investigations. This constant communication allows the investigators to receive consultation on processes such as whether to conduct compelled interviews.

115.371 (f) The Mini-Cassia Juvenile Detention Center accepts all allegations of abuse or harassment regardless of the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as

resident or staff. All allegations are submitted to Hotline and forwarded to the Police Department. When interviewed, the Director confirmed the facility does not judge the person or the allegations, nor require a polygraph or other truth telling device as a condition for proceeding. He stated they immediately would forward all allegations of sexual abuse and sexual harassment to the proper authorities as listed in facility policy.

115.371 (g) In accordance with MCJDC Policy the Mini-Cassia Juvenile Detention Center is not responsible for investigations. Investigations, by outside agencies, into sexual abuse do include a determination as to whether staff actions or failures to act contributed to the abuse. The investigations are documented and include all aspects of the investigation into the allegation.

The MCJDC Director / PREA Coordinator has received training and understands the protocols for preserving evidence, separating those involved, and getting written statements that can be used in the investigation.

115.371 (h) Because there were zero investigations, Auditor Howell was unable to determine compliance or non-compliance as to whether criminal investigations were documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

115.371 (i) In accordance with Mini-Cassia Juvenile Detention Center policy all criminal investigations are referred to the Police and Sheriff's Department. Any determination to pursue prosecution is determined by the District Attorney's office.

115.371 (j) The Mini-Cassia Juvenile Detention Center Director / PREA Coordinator reported that in the case of investigations such as those referenced in 115.371(g) and (h) they would retain those files as long as the abuser is incarcerated or employed plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention.

115.371 (k) Mini-Cassia County Regional Juvenile Detention Center does not conduct sexual abuse investigations, therefore has no control on the progress or outcome. As confirmed in a law enforcement representative interview, the Police and Sheriff's Departments do not terminate an investigation based on the departure of an alleged abuser or victim from the employment at the facility.

115.371 (l) Auditor is not required to audit this provision.

115.371. (m) Administrative staff interviewed, and facility policy confirmed the Mini-Cassia Juvenile Detention Center staff would cooperate with outside sexual abuse investigators and endeavor to remain informed about the progress of the investigation as appropriate. 10 of 10 staff confirmed they would participate in the investigation as requested by an outside investigative authority. The Director / PREA Coordinator, and Supervisors all explained that they would fully cooperate with outside agencies investigating sexual abuse and sexual harassment and they would remain involved until the investigation was complete.

Based on the documentation reviewed and information learned from facility staff interviews and outside agency interviews the auditor determined Mini-Cassia Juvenile Detention Center to be compliant with standard 115.371 (a-m).

Corrective Action Required: None

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-7 Criminal and Administrative Investigations</p> <p>Interviews included: Director / PREA Coordinator Random Staff Outside Agency Investigative Staff</p> <p>Site Review / Observations: N/A</p> <p>Provisions: 115.372 (a) 2 of 2 facility administrators (Director / PREA Coordinator , and Administrative Assistant) , reported no allegations or investigations in the past 12 months. Outside agencies reported no knowledge of Mini-Cassia Juvenile Detention Center related allegations or investigations in the past 12 months. The MCJDC does not conduct criminal investigations into allegations of sexual abuse or sexual harassment. All investigations are conducted by outside agencies. Once an investigative agency substantiates an allegation of abuse the Mini-Cassia Juvenile Detention Center may take disciplinary action against the staff involved. Law enforcement representatives reported the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or harassment are substantiated.</p> <p>Because there were no reported allegations or investigations during the past 12 months, a review of facility policy, and interviews with outside agency representatives, auditor Howell determined the facility meets the requirements of standard 115.372 (a)</p> <p>Corrective Action Required: None</p>

115.373	Reporting to residents
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 772 488">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-7: Criminal and Administrative Investigations Staff Files</p> <p data-bbox="280 651 671 768">Interviews included: Director / PREA Coordinator Random Residents</p> <p data-bbox="280 806 719 882">Site Review / Observations: N/A</p> <p data-bbox="280 920 456 954">Provisions:</p> <p data-bbox="280 965 1465 1122">115.373 (a) Page #4 section #10 of MCJDC PREA Policy 16-7 states that the Director shall inform the resident of the outcome and whether the allegation was determined substantiated, unsubstantiated or unfounded. It also goes onto list that all notifications given to residents will be pursuant to PREA standard 115.373.</p> <p data-bbox="280 1160 1465 1361">115.373 (b) Mini-Cassia Juvenile Detention Center does not conduct investigations, the facility policy on investigations states the facility shall request the information from the investigating agency in order to inform the resident.“ Because there were no investigations reported during the past 12 months, therefore there were no outcomes and notifications to verify for this PREA Audit.</p> <p data-bbox="280 1400 1481 1646">115.373 (c) Mini-Cassia Juvenile Detention Center PREA Policy states that following a resident’s allegation that a staff member committed sexual abuse against the resident, the agency shall subsequently inform the resident (unless the agency has determined that the allegation is unfounded) whenever the staff member is indicted, convicted, or transferred from the resident’s living unit or from employment at the Juvenile Detention Center.</p> <p data-bbox="280 1684 1481 1975">PREA Auditor Lawrence Howell could not review any examples of documented proof of resident notification (in accordance with 115.373 (c) because there were no reported allegations. Auditor Howell was unable to interview residents who reported sexual abuse because there were no allegations of abuse or harassment reported for the past 12 months at the facility. 7 of 7 residents interviewed answered “no” when asked if they had, or if they were aware of any other resident that had reported sexual abuse or harassment at Mini-Cassia Juvenile Detention Center.</p> <p data-bbox="280 2013 1401 2080">115.373 (d) The Mini-Cassia Juvenile Detention Center policy does address this provision on page 4 of PREA Policy 16-7. It states, the resident will be informed</p>

whenever a resident alleged to have committed the sexual abuse is convicted or indicted on a charge related to sexual abuse within the facility, abuse the Director / PREA Coordinator shall subsequently inform the alleged victim.

The facility administration could not provide any examples of documented proof of resident notification (in accordance with 115.373 (d) because there were no reported allegations in the past 12 months. Auditor Howell was unable to interview residents who reported sexual abuse because there were no allegations of abuse or harassment reported for the past 12 months and 7 of the 7 remaining residents said they were not aware of any allegations of sexual abuse or harassment before or during their time at the facility.

115.373 (e) The facility administration did not have any examples of documented proof of resident notifications (in accordance with 115.373 (e) because there were no reported allegations during the past 12 months. Page 2 of PREA Policy 16-7 states, "All criminal investigations shall be documented in a written report that contains a through descriptions of physical, testimonial, and documentary evidence with copies of all documentary evidence attached, where feasible."

Because there were no reported allegations or investigations during the past 12 months, a review of facility policy, and interviews with facility representatives, auditor Howell determined the facility meets the requirements of standard 115.373 (a - e)

Corrective Action Required: None

115.376	Disciplinary sanctions for staff
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <hr/> <p data-bbox="280 383 1353 456">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 499 772 533">Documents reviewed included: PAQ Mini-Cassia Juvenile Detention Center PREA Policy 16-8: Disciplinary Actions for Staff, Residents and Corrective Action for Contractors and Volunteers</p> <p data-bbox="280 696 608 730">Interviews included: Director / PREA Coordinator (with Human Resources responsibilities) Supervisory Staff Administrative Assistant Random Staff</p> <p data-bbox="280 936 719 969">Site Review / Observations: N/A</p> <p data-bbox="280 1048 459 1081">Provisions: 115.376 (a) MCJDC staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. See page 1 of PREA Policy 16-8. The facility Director confirmed this practice is followed.</p> <p data-bbox="280 1245 1474 1570">115.376 (b & c) PREA policy 16-8 on page 1 #2 states, "Disciplinary sanctions against staff for violations of the agency's policies relative to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by staff with similar histories." The Director explained termination was the presumed sanction for a staff person found in violation of policies prohibiting sexual abuse and such conduct will be reported to law enforcement and licensing agencies.</p> <p data-bbox="280 1608 1474 1850">115.376 (d) Key staff interviews and the Mini-Cassia County PREA Policy showed the administrators and policy were consistent in their approach to employee discipline for violations of the PREA policies. Regardless of staff resignations, staff who would have been terminated would still be reported to law enforcement. Director Bodily explained the Police and Sheriff's Departments were near and worked closely with MCJDC.</p> <p data-bbox="280 1861 1474 2063">During the on-site phase of the audit, PREA Auditor Howell reviewed staff files, including disciplinary actions. Documents reviewed showed zero disciplinary actions for violating the agency's PREA related policies in the past 12 months. MCJDC staff reported zero terminations in the past 12 months for violations of the agency's Zero Tolerance Policy.</p>

Based on a review of the documentation available and the information learned in staff interviews the facility was determined to be in compliance with Standard 115.376 (a-d)

Corrective Action Required: None

115.377	Corrective action for contractors and volunteers
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 383 1353 456">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 499 770 533">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-8: Disciplinary Actions for Staff, Residents and Corrective Action for Contractors and Volunteers Staff Files</p> <p data-bbox="280 696 606 730">Interviews included: Facility Director / PREA Coordinator (with Human Resources duties) Administrative Assistant Supervisory Staff</p> <p data-bbox="280 893 719 927">Site Review / Observations: N/A Provisions:</p> <p data-bbox="280 1005 1437 1205">115.377 (a) Included in Mini-Cassia Juvenile Detention Center Policy 16-8 #4 is language that, "any contractor or volunteer who engages in sexual abuse or any other violation of agency sexual abuse or sexual harassment policies shall be prohibited from having further contact with residents and shall be reported to law enforcement and to relevant licensing body."</p> <p data-bbox="280 1245 1469 1402">During staff interviews with the two Supervisors, Auditor Howell asked the two staff members to explain what they would do if they received an allegation of sexual abuse or sexual harassment by a contractor or volunteer. Both staff said they would call law enforcement and report the information to the Director / PREA Coordinator.</p> <p data-bbox="280 1442 1366 1516">There were zero reports of sexual abuse or sexual harassment in the past 12 months.</p> <p data-bbox="280 1556 1469 1839">115.377 (b) According to Director Bodily, Mini-Cassia Juvenile Detention Center conducts regular background checks on all employees, volunteers, and contractors before they are permitted to work with residents. If anytime later the same employees, volunteers, and contractors are found to have violated agency sexual abuse and sexual harassment policies they will be prohibited from having further contact with residents. Auditor Howell reviewed the background check of all staff on the MCJDC roster. All had been completed in during the past 12 months.</p> <p data-bbox="280 1879 1477 2078">Due to the COVID pandemic protocols, volunteers and contractors have been limited during the past two years. A small group of guests periodically perform church services and Narcotics Anonymous groups. The guests are always escorted throughout the facility and never left alone with residents. There have been no allegations of sexual abuse or sexual harassment in the past 12 months.</p>

	<p>The facility meets the requirements of standard 115.377 (a-b)</p>
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Corrective Action Required: None

115.378	Interventions and disciplinary sanctions for residents
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 770 488">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-8: Disciplinary Actions for Staff, Residents and Corrective Action for Contractors and Volunteers Staff Files</p> <p data-bbox="280 651 606 685">Interviews included: Director / PREA Coordinator Random Residents Intake Staff</p> <p data-bbox="280 848 719 882">Site Review / Observations: N/A</p> <p data-bbox="280 960 456 994">Provisions:</p> <p data-bbox="280 1005 1465 1245">115.378 (a) MCJDC policy 16-8 #6 states that a resident may be subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in sexual abuse or following a criminal finding of resident-on-resident sexual abuse or following a criminal finding of guilt for resident on resident sexual abuse. Facility administrators confirmed this policy in their interviews.</p> <p data-bbox="280 1285 1469 1733">115.378 (b) According to the Director / PREA Coordinator and Random Staff interviewed, the facility does not practice isolation as a form of punishment, however a resident may need to be moved or separated from others to another room during an investigation. Regardless of the location of their room, residents are provided the same rights as other residents including large muscle exercise on a daily basis, educational programing, daily visits from medical and mental health providers, and other programming to the extent possible. As a result of there being, in the last 12 months, no allegations of sexual abuse or sexual harassment, there were no reports or case files to review to determine non-compliance with the standard of prohibiting isolation as a sanction for resident-on-resident sexual abuse.</p> <p data-bbox="280 1774 1481 1975">115.378 (c) During this audit, the Mini-Cassia Juvenile Detention Center Director was intricately involved in the audit process. During interactions and interviews with Auditor Howell he explained how the disciplinary process considers a resident's psychological disabilities and mental diagnosis. Random staff also discussed how sanctions should be appropriate to the individual assessed needs of the resident.</p> <p data-bbox="280 2016 1477 2092">15.378 (d) Intake staff explained the facility is for short term detention and does not offer therapy for youth abusers counseling and other interventions designed to</p>

address and correct underlying reasons or motivations for residents to participate in sexual abuse or harassment. If a resident were to stay longer than normal the contract clinician may provide such counseling, but it would be as a condition of access to behavior-based incentives, but not as a condition to access general programming, education services, medical care, or exercise.

115.378 (e) Supervisory staff confirmed that the facility may discipline a resident for sexual contact with a staff only upon a finding that the staff member did not consent to such contact. There were no incidents of this type reported in the past 12 months.

115.378 (f) Mini-Cassia Juvenile Detention Center resident PREA education materials states residents cannot get in trouble for filing a grievance. Furthermore, a report of sexual abuse in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.378 (g) Page 2 #10 of the "Disciplinary Actions" Policy and resident educational materials make it clear that sexual contact between residents is prohibited. All sexual contact is subject to disciplinary action. In Random Staff interviews, 10 of 10 staff confirmed sexual contact between residents was prohibited at the facility. They also confirmed they would report all allegations of sexual contact, sexual harassment, and sexual abuse. The outside investigative agencies would determine if sexual conduct was coerced, and a crime was committed.

Based on the documents reviewed and the information ascertained in interviews, the facility meets the requirements of standard 115.378 (a-g)

Corrective Action Required: None

115.381	Medical and mental health screenings; history of sexual abuse
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 770 492">Documents reviewed included:</p> <p data-bbox="280 497 1453 658">Mini-Cassia Juvenile Detention Center PREA Policy 16-2: Medical and Mental Health Care Resident Files MCJDC Screening Tool</p> <p data-bbox="280 698 608 734">Interviews included:</p> <p data-bbox="280 739 911 900">Director / PREA Coordinator Supervisory Staff Intake Staff - Staff Responsible for Screening Random Staff</p> <p data-bbox="280 940 719 976">Site Review / Observations:</p> <p data-bbox="280 981 336 1016">N/A</p> <p data-bbox="280 1088 459 1124">Provisions:</p> <p data-bbox="280 1128 1477 1415">115.381 (a) When the residents are admitted to the facility, they are screened pursuant to § 115.341. According to the intake staff and Director if the intake screen indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the facility ensures that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. MCJDC PREA policy supports this procedure on page 1, paragraph 1.</p> <p data-bbox="280 1420 1453 1541">Through staff interviews, resident interviews, file audits Auditor Howell was able to determine that the facility was in compliance with 115.381 (a) and there was not was an allegation of sexual victimization made in the past 12 months.</p> <p data-bbox="280 1581 1461 1944">115.381 (b) During their staff interviews the Director / PREA Coordinator explained that if the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. There were no allegations of sexual abuse or harassment during the past 12 months. Auditor Howell reviewed resident files, including intake screening and mental health documents, and found no evidence of non-compliance with this standard.</p> <p data-bbox="280 1984 1469 2060">115.381 (c) The Mini-Cassia Juvenile Detention Center manages information sharing based on a need to know. The information learned during intake screening remains</p>

confidential and only shared with staff involved in security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law. Information about prior victimization or if a resident has previously perpetrated sexual abuse, in or out of an institutional setting would be shared on a need-to-know basis. While completing the on-site facility tour and the structured on-site interviews, Auditor Howell was able to ask staff what information was shared with whom. No violations of standard 115.381 (c) were observed or discovered during the on-site interviews, file audits, or tour.

115.381 (d) In accordance with this standard medical and mental health staff are required to the obtain informed consent from residents before reporting information about sexual victimization that did not occur in an institutional setting, unless the resident was under the age of 18. MCJDC does not have medical or mental health staff therefore the facility is in not out of compliance. MCJDC does not hold youth past their 18th birthday. Because the facility is a Juvenile Detention Center, Auditor Howell confirmed the staff understood they were mandated child abuse reporters. All staff interviewed acknowledged they were mandated child abuse reporters.

The facility meets the requirements of Standard 115.381 (a-d)

Corrective Action Required: None

115.382	Access to emergency medical and mental health services
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 454 770 488">Documents reviewed included:</p> <p data-bbox="280 497 1453 573">Mini-Cassia Juvenile Detention Center PREA Policy 16-2: Medical and Mental Health Care</p> <p data-bbox="280 580 1422 656">Mini-Cassia Juvenile Detention Center PREA Policy 16-21 Sexual Abuse Response Protocol</p> <p data-bbox="280 663 419 696">Staff Files</p> <p data-bbox="280 703 927 736">Medical Screening Tool / Health Questionnaire</p> <p data-bbox="280 743 619 777">MCJDC Assessment Tool</p> <p data-bbox="280 815 604 848">Interviews included:</p> <p data-bbox="280 857 671 891">Director / PREA Coordinator</p> <p data-bbox="280 898 604 931">Hotline Representative</p> <p data-bbox="280 938 445 972">Intake Staff</p> <p data-bbox="280 978 475 1012">Random Staff</p> <p data-bbox="280 1050 719 1084">Site Review / Observations:</p> <p data-bbox="280 1093 333 1126">N/A</p> <p data-bbox="280 1178 456 1211">Provisions:</p> <p data-bbox="280 1249 1474 1621">115.382 (a) According to Mini-Cassia Juvenile Detention PREA Policy, alleged victims of sexual offense shall immediately be separated from the alleged abuser, advised to not destroy evidence, and referred to medical services for medical assessment and/or treatment. MCJDC staff explained alleged victims of prior sexual abuse would receive unimpeded access to emergency medical treatment and crisis intervention services by referral the nature and scope of which are determined by medical and mental health practitioners according to their professional judgement. If a resident were to make an allegation of victimization, they would be transported to the local medical facilities where forensic emergency services are available.</p> <p data-bbox="280 1659 1482 2069">115.382 (b) Mini-Cassia Juvenile Detention Center does not have qualified medical (nursing) staff on duty. If there is a report, staff first responders take preliminary steps to protect the victim pursuant to § 115.362. This was confirmed in the staff interviews. First Responder staff interviewed could explain the initial steps to protect the victim of sexual abuse. 100% of staff also stated they would, upon learning of an allegation or incident, immediately notify their supervisor who would then notify the appropriate medical and mental health practitioners. Supervisors explained they would secure potential evidence and arrange transportation to qualified medical and mental health practitioners immediately upon receiving a report from a subordinate.</p>

115.382 (c) Mini-Cassia County Juvenile Detention Center PREA Policy 16-2 #3 states that resident victims of sexual abuse have unimpeded access to medical and mental health practitioners who can provide medical and mental health assistance including emergency medical treatment and crisis intervention services. In staff interviews the facility staff could explain in the event of an incident that was sexual in nature, residents would be immediately transported to the hospital for medical services and offered appropriate and timely information and services. Both the hospital emergency room staff and the MCJDC Director reported zero allegations of sexual abuse and zero allegations of sexual harassment in the past 12 months. There were no residents who reported abuse; therefore, auditor Howell could not ask residents who had reported abuse what information they received or what treatment they were offered after what happened to them.

115.382 (d) During interviews the Director , Medical Director, and outside advocacy representatives reported treatment services for victims of sexual abuse were provided without cost and regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.” According to Mini-Cassia County policy 16-2 #6, “Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

Based on the information received through staff interviews and document reviews the facility was found in compliance with standard 115.382 (a-d).

Corrective Action Required: None

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in the making the compliance decision.</p> <p>Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-2: Medical and Metal Health Care Mini-Cassia Juvenile Detention Center PREA Policy 16-21: Sexual Abuse Response Protocol PAQ Resident records</p> <p>Interviews included: Director / PREA Coordinator Intake Staff Random Staff</p> <p>Site Review / Observations: Observation of facility wall postings and brochures</p> <p>Provisions: 115.383(a) The Mini-Cassia Juvenile Detention Center PREA Policy 16-21 lists the procedure for screening for risk of sexual victimization and abusiveness and/or offers a medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The Admissions Packet includes screening and evaluation tools for both mental and medical health.</p> <p>115.383(b) The evaluation and treatment of sexual abuse victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Resources for residents of Mini-Cassia Juvenile Detention Center include local hospital for medical services and Janet Loveland and/or Mini-Cassia Shelter Advocates Against Violence for emotional support follow up services. Because there were no reports of sexual abuse or sexual harassment, Auditor Howell was unable to interview any residents that had made a report and may have needed follow up services.</p> <p>115.383 (c) The facility administrators confirmed that the facility provides sexual assault and harassment victims with medical and mental health services consistent with the community level of care. During interviews with the police and the hospital</p>

staff, a community approach was clear. The approach was to find the best level of care for any situation that may arise for youth admitted to MCJDC.

115.383 (d,e,f) Resident victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests as part of the Forensic Exam process. The emergency room staff confirmed that they offering pregnancy test, providing timely and comprehensive information about and to all lawful pregnancy related medical services, and testing for sexually transmitted infections was part of the protocol used.

115.383(g) According to the facility policy and confirmed during interviews of the Director / PREA Coordinator , and the hospital staff the residents at Mini-Cassia County Juvenile Detention Center are able to receive treatment services without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident. There were zero reported incidents of sexual abuse, therefore there were no residents to ask or records to review to determine non-compliance with this standard.

115.383 (h) Mini-Cassia Juvenile Detention Center policy (16-2 #13) states the facility does attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. Staff reported they would again address the issue upon SAVAC re-evaluation if the resident stayed long enough to require a twice a year evaluation.

Based on the information received through staff interviews, interviews with medical and mental health staff, facility tours, and file reviews the facility was in compliance with standard 115.383 (a-h).

Corrective Action Required: None

115.386	Sexual abuse incident reviews
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 492">Documents reviewed included:</p> <p data-bbox="280 497 1410 654">Mini-Cassia Juvenile Detention Center PREA Policy 16-11: Sexual Abuse Incident Reviews Resident Files Incident Report Form</p> <p data-bbox="280 694 606 730">Interviews included:</p> <p data-bbox="280 734 727 810">Director / PREA Coordinator Incident Review Team Members</p> <p data-bbox="280 851 651 887">Observations included:</p> <p data-bbox="280 891 357 927">None</p> <p data-bbox="280 967 459 1003">Provisions:</p> <p data-bbox="280 1008 1474 1164">115.386 (a & b) In accordance with Mini-Cassia Juvenile Detention Center PREA Policy 16-11, page 1 paragraph 1, the Incident Review Team conducts incident reviews within 30 days of the conclusion of every sexual abuse investigation (unless the allegation has been determined to be unfounded).</p> <p data-bbox="280 1205 1474 1482">115.386 (c) The incident review team includes members of upper management who get input from everyone involved including but not limited to; supervisors, investigators, and medical and mental health practitioners. At the Mini-Cassia Juvenile Detention Center upper management positions involved with input from everyone present when the incident occurred and involved in the investigation. Input is received from supervisors, investigators, medical and mental health practitioners.</p> <p data-bbox="280 1500 1474 1612">Interviews with outside agency officials confirmed they would participate in any post investigation review. There were zero allegations and investigations of sexual abuse in the past 12 months, therefore there were no incident reviews to evaluate.</p> <p data-bbox="280 1653 1474 2065">115.386 (d) Interviews of incident review team members indicated that they would: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex Identification, status, or perceived status; gang affiliation; or other group dynamics at the facility. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. Assess the adequacy of staffing levels in that area during different shifts. Assess whether monitoring technology should be deployed or augmented to</p>

supplement supervision by staff.

Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the Director / PREA Coordinator

There were no investigations during the past 12 months, therefore there were no incident review reports to evaluate.

115.386 (e) Mini-Cassia Juvenile Detention Center PREA Policy 16-11 #7, states the facility shall prepare a report of findings and recommendations for improvement. Detention Administration shall implement the recommendations or document the reasons for not doing so.

There were no investigations or reported incidents in the past 12 months, therefore there were no recommendations for improvement to audit.

Based on the information received through staff interviews, interviews with review team members, facility tours, and policy review the facility was determined to be in compliance with standard 115.386 (a-e).

Corrective Action Required: None

115.387	Data collection
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 770 492">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-20: Data Collection, Aggregation, and Review</p> <p data-bbox="280 609 671 685">Interviews included: Director / PREA Coordinator</p> <p data-bbox="280 725 336 801">Observations included: N/A</p> <p data-bbox="280 842 459 878">Provisions:</p> <p data-bbox="280 882 1445 1079">115.387 (a) The Mini-Cassia County Juvenile Detention Center PREA Policy adequately addresses Data Collection and Storage on page 2 #3. The MCJDC Director is responsible for collecting accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The standard instrument used is the Department of Justice Survey of Sexual Victimization.</p> <p data-bbox="280 1120 1465 1402">115.387 (b) The Mini-Cassia Juvenile Detention Center Director / PREA Coordinator reported that they would review, collect, aggregate and report all data if the facility had any allegations of sexual abuse or sexual harassment. He acknowledged a review and report should be done at least annually. The facility does maintain records and collect data as needed from all incident-based documents related to all incidents. There were no allegations or incidents related to sexual abuse or harassment in the past 12 months.</p> <p data-bbox="280 1442 1433 1599">115.387 (c) Mini-Cassia Juvenile Detention Center participated in the most recent version of the Survey of Sexual Violence conducted by the DOJ. Director Bodily is required to report the minimum data necessary to participate in the survey as necessary.</p> <p data-bbox="280 1639 1474 1836">115.387 (d) Auditor Howell was able to find and review incident-related documents, but there were none that included investigations and sexual abuse incident reviews. The facility is prepared to collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="280 1877 1453 2038">115.87 (e) Mini-Cassia Juvenile Detention Center is a regional detention center. There is no need to obtain incident-based and aggregated data from any private facility with which it contracts for the confinement of its residents because they do not contract with any facility for the confinement of its residents.</p>

115.387 (f) Upon request, the facility shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Based on the information received through staff interviews, facility tours, and document reviews the facility was in compliance with standard 115.387 (a-f).

Corrective Action Required: None

115.388	Data review for corrective action
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 456 772 492">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-20 Data Collection, Aggregation, and Review 2022 Mini-Cassia Juvenile Detention Center Annual Survey of Sexual Violence Report PAQ www.minidoka.id.us</p> <p data-bbox="280 734 671 810">Interviews included: Director / PREA Coordinator</p> <p data-bbox="280 851 831 927">Site Review / Observations: Agency web page: www.minidoka.id.us</p> <p data-bbox="280 967 1453 1285">Provisions: 115.388 (a) When interviewed, the facility Director / PREA Coordinator, explained that he is prepared to review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas. Fortunately, there have been no allegations of sexual abuse or harassment in the past 12+ months. In other words, there is no data to aggregate and compare.</p> <p data-bbox="280 1326 1461 1572">115.388 (b) The Mini-Cassia Juvenile Detention Center did not complete an annual report because there were no allegations of sexual abuse or harassment. If there was data, Director Bodily stated the facility would have an annual report that included a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse.</p> <p data-bbox="280 1612 1481 1854">115.388 (c) The Mini-Cassia Juvenile Detention Center did not complete an annual report because there were no allegations of sexual abuse or harassment. The Director / PREA Coordinator stated he would have an annual report approved by the agency head and made readily available to the public through the agency website. All of the facility sexual assault and sexual harassment data is submitted to the agency and aggregated with all DYS youth facilities.</p> <p data-bbox="280 1895 1477 2092">115.388 (d) The Mini-Cassia County Juvenile Detention Center did not complete an annual report because there were no allegations of sexual abuse or harassment. If there was data, the Director acknowledged they would have an annual report and would indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the</p>

safety and security of a facility.

Based on a review of the agency web site, a review of the PREA Policies, and interviews of the Director , and the fact the information is included in the 2022 SSV Annual Report, the facility was determined to be in compliance with 115.388.

Corrective Action Required: None

115.389	Data storage, publication, and destruction
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1353 416">The following evidence was analyzed in the making the compliance decision.</p> <p data-bbox="280 427 770 461">Documents reviewed included: Mini-Cassia Juvenile Detention Center PREA Policy 16-20: Data Collection, Aggregation, and Review</p> <p data-bbox="280 580 606 613">Interviews included: Director / PREA Coordinator Administrative Assistant</p> <p data-bbox="280 732 719 766">Site Review / Observations: Agency web page: www.minidoka.id.us</p> <p data-bbox="280 848 456 882">Provisions:</p> <p data-bbox="280 920 1481 1205">115.389 (a) Mini-Cassia Juvenile Detention Center PREA Handbook page 2 addresses record keeping and storage. The facility collects and retains sexual abuse and sexual harassment data pursuant to § 115.387. While on tour Auditor Howell confirmed all records requiring to be stored in a confidential manner are stored in a secure and confidential manner. The Juvenile Detention Center electronic records security for those records is managed through a password system and overall network access management.</p> <p data-bbox="280 1243 1481 1485">115.389 (b) The facility, through the DYS agency web site, makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through the agency website. Upon a review of on-site records, the agency web site, and through interviews Auditor Howell could not find evidence of any allegations of sexual Abuse or harassment during the past 12 months.</p> <p data-bbox="280 1523 1481 1722">115.389 (c) Due to there not being any data to aggregate, the issue of completing an annual aggregated sexual abuse report was discussed with the Director / PREA Coordinator and Administrative Assistant. Both individuals stated they understood that future reports of sexual abuse and harassment would have all personal identifiers removed before making aggregated sexual abuse data publicly available.</p> <p data-bbox="280 1760 1481 1879">115.389 (d) The Mini-Cassia Juvenile Detention Center policy directs sexual abuse documents and data collected pursuant to § 115.387 and securely stored as an electronic record for at least 10 years after the date of the initial collection.</p> <p data-bbox="280 1917 1458 2036">Following key staff interviews, annual report reviews, and a review of the agency web site the facility was determined in compliance with 115.389 (a-d).</p>

	Corrective Action Required: None
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility was in compliance with standard 115.401 as a result of the following:</p> <p>115.401 (a & b) The facility was previously audited in accordance with PREA standards. This audit was over 3 years from the last PREA Audit (dated February 25, 2019). An audit was conducted by a different PREA auditor in 2022, but a Final Report was never received by the facility. Auditor Howell was contacted by Director Bodily to bring the facility into audit compliance.</p> <p>115.401 (h) PREA Auditor Howell had complete access to and ability to observe every area of the facility. The tour included access to all locked doors including living areas, storage areas, kitchen, and activity spaces. Throughout the on-site portion of the entire facility was accessible as requested.</p> <p>115.401 (i) PREA Auditor Howell was permitted to request and did receive copies of any relevant documents.</p> <p>115.401 (m) PREA Auditor Howell was permitted to conduct private interviews of residents and staff.</p> <p>115.401 (n) A copy of the upcoming audit, with auditor Howell’s contact information was posted 6 weeks in advance of the audit allowing residents to send confidential information or correspondence in the same manner as if they were communicating with legal counsel. No correspondence was received.</p> <p>The Mini-Cassia Juvenile Detention Center is in compliance with Standard 115.401 (a,b, h, i, m, n)</p> <p>Corrective Action Required: None</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance decision:</p> <p>115.403 (f) Mini-Cassia Juvenile Detention Center was audited in 2019. The dates of the facility visit was October 2-4, 2018. A Final PREA Audit Report was issued by certified PREA Auditor Steven Jett on February 25, 2019.</p> <p>The 2019 report is posted on the Minidoka County website.</p> <p>The facility meets the requirements of standard 115.403 (f).</p> <p>Corrective Action Required: None</p>

Appendix: Provision Findings		
115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	yes

115.312 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	yes

115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots"	yes

	or areas where staff or residents may be isolated)?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? (N/A for non-secure facilities)	yes
115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes
115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes

115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes
115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.315 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with residents with disabilities including residents who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	yes

115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes

115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes
115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes

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

115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.321 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na

115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is not responsible for investigating allegations of sexual abuse.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	na
115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes

115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes
115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes

115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

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

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes

115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes
115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes

115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.352 (a)	Exhaustion of administrative remedies	
	<p>Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.</p>	no
115.352 (b)	Exhaustion of administrative remedies	
	<p>Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)</p>	yes
	<p>Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)</p>	yes
115.352 (c)	Exhaustion of administrative remedies	
	<p>Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)</p>	yes
	<p>Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)</p>	yes

115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes

115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes

115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.366 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes

115.367 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes
115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes

115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.373 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.376 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.376 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes

115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	no
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	no

115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes

115.381 (c)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes
115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes

115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes