PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS





Name of facility:	Northeast Oklaho	oma Cor	rectional Center					
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Date report submitted:	January 08, 2015	anuary 08, 2015						
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Date of facility visit:	December 8-10, 2	2014						
Facility Information								
Facility mailing address: (if different from above)								
Telephone number:	918-256-3392							
The facility is:	☐ Military ☐ County ☐ Federal							
	☐ Private for pro	fit	☐ Municipal	State				
	☐ Private not for	profit						
Facility Type:	☐ Jail	⊠ Pris	son					
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Agency Information								
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Governing authority or parent agency: (if applicable)	State of Oklahom	na						
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AUDIT FINDINGS

NARRATIVE:

The Oklahoma Department of Corrections (ODOC), in conjunction with the American Correctional Association (ACA), scheduled a Prison Rape Elimination Act (PREA) audit for the Northeast Oklahoma Correctional Center (NOCC) located in Vinita, Oklahoma. The date of the audit visit was December 8 through December 10, 2014. James Curington, certified PREA auditor, was notified in October, 2014, of this audit for Northeast Oklahoma Correctional Center. The notification informed him that this was part of a double audit, back to back, for Northeast Oklahoma Correctional Center and the Dr. Eddie Warrior Correctional Center. This opportunity to do double audits with the same parent agency helps with the audit by giving the auditor a "double" opportunity for review of policy and procedures, differences, nuances, and similarities in operations. This assignment was for a single certified PREA auditor.

The audit process started with contacts between the ACA Office, the ODOC state PREA Coordinator Millicent Newton-Embry and Jim Curington. Travel, pre-audit information, and tentative schedule times were reviewed telephonically with both the PREA Coordinator, and the institution PREA Manager. A PREA Pre-Audit Reporting Form was completed by the auditor and sent to the PREA Resource Center (PRC) via <audit reporting>. Notices were posted and the process began.

Facility information, from Warden Rodney Redman of NOCC, was sent to the PREA auditor via a USB thumb drive. The thumb drive was divided into seven sections containing: (1) daily population reports, (2) facility maps/schematics, (3) mission statements, (4) 43 folders of completed PREA standards, (5) the Pre-Audit Questionnaire, (6) staffing report with attachments, and (7) the 2014 American Correctional Association Audit Report. These materials, the questionnaire and the 43 standards folders were of significant help in assessing compliance. Special thanks for compilation of this information goes to Beth Crockett, PREA Compliance Manager and Melanie Brenton, Procedures Manager.

The PREA Resource Audit Instrument for Adult Prisons and Jails furnished by the National PREA Resource Center was used for the audit. To summarize, there are seven sections, A through G which were comprised of: A) the Pre-audit Questionnaire, B) the Auditor Compliance Tool, C) the Instructions for the PREA Audit Tour, D) the Interview Protocols, E) the Auditor's Summary Report, F) the Process Map, and G) the Checklist of Documentation.

Following the protocols, including the posting of notices and making contacts, the auditor began reviewing the materials forwarded in the weeks prior. The auditor, beginning with the questionnaire, began review of every item on the thumb drive. The Pre-audit Questionnaire Adult Prisons and Jails was

originally completed November 14, 2014 by Beth Crockett, PREA Compliance Manager with help from Rodney Redman, Warden and Melanie Brenton, Procedures Manager as well as other staff. This questionnaire was carefully reviewed before travel to the facility.

Sunday, December 7, the auditor flew to Tulsa, Oklahoma and was met by the state PREA Coordinator, and traveled to Vinita, Oklahoma. That evening; the Warden, Deputy Warden, PREA Compliance Manager, Procedures Manager, Warden's Assistant, Case Manager Supervisor and Correctional Health Services Administrator all met with the auditor, James Curington, and the state PREA Coordinator to discuss the complexities and direction for accomplishing the agenda of this PREA audit for the Northeast Oklahoma Correctional Center. The PREA auditor stayed in Vinita, Oklahoma only about 2 miles from the facility and commuted each day to and from the institution with the PREA Coordinator Millicent Newton-Embry.

Monday, December 8, after security identifications at the Entry Control Building, the facility visit began. The auditor met with key staff in the administration training room for introductions to department representatives, security representatives and many of the staff who had worked so hard on this PREA audit. The following were in attendance:

Rodney Redman Warden

John Somers Deputy Warden

Beth Crockett PREA Compliance Manager

Jeff Harrison Correctional Health Services Administrator

Mary Nelson Unit Manager

Shannon Atchison Unit Manager

Marla Barton Training Officer

Ben Beede Construction/Maintenance Supervisor

Melanie Brenton Procedures

Leland Fiedler Food Service Manager

John Gulley Business Manager

Heather Harrison Warden's Assistant

Gwenda Hickman Personnel

Connie Kays Case Manager Supervisor

Millicent Newton-Embry PREA Coordinator, ODOC

At this time, the PREA auditor explained to the group that he was there to observe and assess all areas of the facility in order to verify compliance with the 43 PREA standards. The auditor would also pay attention to how well inmates were supervised, how technology was used, how security procedures were followed, being especially cognizant of the safety and security of inmates. Special emphasis would be placed on intake, reception, screening areas, all housing units, healthcare areas, recreation areas,

and any areas that have been or are being renovated, modified or expanded as was noted in the Instructions for the Audit Tour. There were things that would be reviewed and there questions that would be asked especially concerning; Medical, Recreation, working program areas, general housing and segregated housing.

Following the entrance discussion and introductions, the small to medium-sized minimum custody correctional center was toured. The tour began about 8:30 a.m. and continued until approximately a little after noon. The tour group was led by Warden Rodney Redman and included the state PREA Coordinator, Millicent Newton-Embry; the PREA Compliance Manager, Beth Crockett and other key staff. The tour route of NOCC began in the Administration Building and continued as follows:

Library and education classroom and medical/mental health/dental, building

Cottage 9 - barbershop and recreation office

Cottage 10 - safety office

Cottage 11 - law library

Cottage 12 - business office

Cottage 13 - vacant

Covered recreation area

Building 8 - offender housing

Building 4 - offender housing

Building 6 - kitchen/dining area/property rooms/mailroom

Buildings 9, 10 and 11 - flammable/caustic building, maintenance storage building

Building 5 - maintenance/warehouse

Canteen building

Lower building 3 – offices of: Deputy Warden, Case Managers, Records and Procedures

Outside grounds and structures including: the mule barn, hay barns, various sheds, dog kennels and the farm office

Central control and the Chapel completed the tour.

After finishing the tour of this wide-open minimum-security facility, key staff met in the administrative conference room and reviewed, line by line, the Pre-audit Questionnaire. Inmate and staff interviews were scheduled.

Monday afternoon and into the evening, file reviews of the PREA standards along with interviews of staff and inmates proceeded. Following a supper meal, the auditor and Warden returned to the facility to conduct midnight shift interviews and tour the facility in the late hours.

Tuesday morning, December 9, the auditor and key NOCC staff again commenced PREA file reviews, paying particular attention to privacy issues, intake, and security operations. It was noted that this

minimum-security facility had only four confinement cells, minimal disciplinary problems and excellent communication between staff and inmates. These factors contributed to a well ordered, well-managed operation.

In addition to specific PREA materials, the PREA auditor was furnished with a Northeast Oklahoma Correctional Center notebook addressing PREA compliance. This notebook presented an overview of the facility and was divided into sections: including a staff section with pictures and backgrounds, a facility schematic/footprint section, and a section describing departments and operations of the NOCC. The notebook also addressed cameras, listed needs, described staffing which included the master roster, and included a copy of the Pre-audit Questionnaire. It is information and material such as just described that helps the PREA auditor understand and evaluate compliance or noncompliance with PREA law. Using materials presented, standards outlined and detailed in the individual folders, and further supplemented with compliance documents, helped make it clear to this auditor that staff, inmates, volunteers, and contractors were all working hard to meet PREA standards compliance as mandated.

Wednesday morning, December 10, the auditor again went over the 43 standards with the Warden and staff. The auditor also revisited the institutional compound area and visited with inmates.

Albeit there is no formal exit interview for a PREA audit visit and review, the auditor met and summarized preliminary observations and his assessment of the audit. Simply, there were no red flags. Any issues, problems or concerns (minor at worst) were addressed by the Warden and PREA Compliance Manager to this auditor's satisfaction. Following this narrative and facility description, is the auditor's summary checklist on the 43 PREA standards, which speaks for itself.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Northeast Oklahoma Correctional Center (NOCC) of the Oklahoma Department of Corrections (ODOC) is located in Vinita, Oklahoma, about 60 miles northeast of Tulsa, Oklahoma in Craig County. This is a small minimum-security adult male correctional institution on state property that was originally the Oklahoma Forensic Center which was an adult psychiatric hospital operated by the Oklahoma Department of Mental Health and Substance Abuse Services. With the downsizing of large mental health state facilities, this older historic center has closed many buildings and has passed some buildings and some infrastructure on to the ODOC/NOCC. Specifically, in 1994, by legislative action, NOCC assumed control of three buildings and five cottages from the Oklahoma Forensic Center in July with the first offenders arriving December 13, 1994. Since that time, all of the buildings have been renovated.

Presently, the NOCC is situated on 1500 acres with 37 buildings. Fifteen buildings compose the main compound with 19 outbuildings for the ODOC Agri-Services and 3 staff houses for the Warden, Deputy Warden, and Chief of Security.

There are two housing units in the main compound with a maximum capacity of 525 male inmates housed in two of these units (building 4 and building 8). Building 4 consists of 75 two men cells, 8 multi-occupancy cells, and 3 open bay dorms (25 man, 24 man, 13 man). Building 8 is a four quad open bay dorm housing area with 66 offenders housed on each quad, along with two, 12 person open dorm style housing areas. For this very minimum security institution, there is no perimeter fencing, perimeter road or mobile patrol. There is some cross fencing for the housing units and building 4 is surrounded by a double chain-link fence with two gates. These two units are secured nightly. Currently, NOCC has 32 cameras in use, 28 fixed dome style cameras located throughout the facility and 4 pan/zoom cameras

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located outside to monitor movement around the facility. The cameras are monitored in the Central Control office.

The NOCC has a large basketball and handball courts pavilion, a covered workout area, a horseshoe pit, a softball field, a volleyball court, a Frisbee toss area, and a lot of area for recreation and exercise, including picnic tables, for offender use. This is indicative of a relaxed minimum-security facility. In touring the areas of NOCC and interacting with the population; it was clear, to this auditor, there was a sense of safety and security, a relaxed yet appropriate professional interaction between staff and inmates, and an expectation by the inmates of release and returning to the community.

The majority of the lands of NOCC is involved in farming operations. There are 325 commercial Angus crossbred cattle, there is a large hay bailing operation, a tractor/equipment operation, a fencing and cross fencing operation, and general farm maintenance.

Health Care Services are provided Monday through Friday with on-call healthcare personnel 24/7. Mental health services are Monday through Friday again with on-call services available. Healthcare emergencies are handled through the community 911 system. The local contract for these emergencies is Craig General Hospital, Vinita, Oklahoma. No forensic exams are conducted at NOCC. The facility utilizes Grove Integris Hospital, Grove, Oklahoma. The facility also utilizes the Community Crisis Center in Miami, Oklahoma for victim advocacy and counseling.

During the tour and visit at NOCC, the daily operations were observed; administrative, security, food service, education, chaplaincy services, volunteer services, maintenance, offender work programs, unit management/social services treatment were all working as a team, and impressed the auditor with their preparation for this PREA audit and compliance with the Prison Rape Elimination Act standards. Simply, there was a sense of teamwork, "buy-in", hard work and preparation to accomplish a successful audit.

The Mission of Northeast Oklahoma Correctional Center is: "to provide custody and control for minimum-security offenders and to provide meaningful work opportunities in the areas of institutional support; to provide community support through Prisoner Public Work Program; and to provide educational opportunities through reintegration activities to return the offender to society as a more productive citizen."

Oklahoma Department of Corrections Mission:

To protect the public

To protect the employee

To protect the offender

Facility Demographics:

Rated Capacity: 525

Actual Population: 520 (12/8/2014)

Age range of population: 18-75

Security: Minimum

Number of youthful offenders: 0 N/A

Length of stay or time under supervision: 9months 18days

Number of full-time staff: 96; Administrative 13; Security 47; Health Services 10;

Program 16; Food Service 5; Agri-Ser 3; Other 2

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 3 Number of standards met: 38 Number of standards not met: 0

Non-applicable: 2

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The Oklahoma Department of Corrections (ODOC) has a "Zero Tolerance" facility operations policy, section – 03, OP-030601, Oklahoma Prison Rape Elimination Act (Oklahoma PREA) effective 11/25/2014, which instructs the agency to provide a safe, humane and secure environment for all offenders. In section 1, the policy states that ODOC maintains a Zero Tolerance for offender on offender sexual assault, staff sexual misconduct and sexual harassment towards offenders. Also, every allegation of sexual assault, misconduct or harassment is to be thoroughly investigated.
This policy, with supporting attachments and referenced policies of the Oklahoma Department of Corrections, clearly outlines Oklahoma's commitment to PREA law. Furthermore, through discussions with staff and inmates, observation of bulletin boards, posters, handouts and materials, review of inmate and staff handbooks, and personnel policies, it is clear that the facilities of ODOC are committed to Zero Tolerance of sexual abuse and sexual harassment. Northeast Oklahoma Correctional Center has also developed its own NOCC – 030601 - 01 procedure, further enhancing Oklahoma PREA. This procedure effective 12/8/14, addresses: Zero Tolerance (prevention, detection, response, and prosecution/discipline of assailants); sexual abuse incident review; and references (offender housing, Oklahoma PREA, investigations, use of force, reporting incidents, offender grievances, mental health services, duties and responsibilities, PREA and jail standards).
Organizational charts were reviewed. The PREA Coordinator for the Oklahoma Department of Corrections reports directly in the chain to the Inspector General of the ODOC. The PREA manager, as outlined in the institutional organizational chart reports directly to the Warden at Northeast Oklahoma Correctional Center.
§115.12 - Contracting with other entities for the confinement of inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ \ \ \ \ \ \ \ \ \ \ \ \ $
☐ Does Not Meet Standard (requires corrective action)
The Oklahoma Department of Corrections has established policy and compliance rate

requirements when contracting with other entities for the supervision of, and confinement of,

inmates to include PREA law compliance and Zero Tolerance for sexual abuse/sexual

harassment.

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In reviewing the written responses to the Agency Contract Administrator's interview questions, it "specifies any contract between ODOC and a private prison contractor whereby the contractor provides for the housing, care and control of offenders... will comply with the procedures of ODOC as specified in the contract and as updated in the contract renewal". Furthermore, to the question, have PREA compliance results been completed for each contract entered into agreement within the past 12 months, the response was "yes".

§115.13 – Supervision and Monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
NOCC is a minimum security facility with staffing as outlined in the description of the unit. This is minimal staffing, yet appropriate for this minimum-security institution. The Warden
and his staff, including the Personnel Department, Security Department, and Business
Department, have continually reviewed staffing for the institution. The staffing plan appears

Immediate and higher-level staff conduct unannounced rounds to identify any deviation from policy and procedure, including deviation from compliance with the prevention of sexual abuse and sexual harassment policy. Interviews with staff and review of documentation confirms these unannounced rounds.

to meet the needs and priorities set by the agency and the institution. It affords good order

Interviews with staff and inmates revealed that they felt safe at this facility.

and discipline and addresses the safety and security of staff and inmates.

§115.14 – Youthful Inmates

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

No youthful offenders, inmates under 18, are housed at NOCC. Oklahoma Department of Corrections does not house inmates under 18 at NOCC.

§115.15 – Limits to Cross-Gender Viewing and Searches

3115/15 Emilio to di oss demaer viewing and searches
☐ Exceeds Standard (substantially exceeds requirement of standard)
□ Does Not Meet Standard (requires corrective action)
Oklahoma Department of Corrections; through its Facility Operations Policy, OP – 030601, Oklahoma PREA, and through its Search and Seizure Standards, Security Policy Section – 04, OP – 040110; addresses limits to cross gender viewing and searches.
The first policy, addresses cross gender viewing and clearly states that an offender shall be able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks or genitalia, except in exigent circumstances, or when such viewing is incidental to routine self-checks. The second policy (searches) stipulates that patdown, frisk, strip, and visual body cavity searches of offenders will be conducted by staff trained in conducting searches. Strip searches and visual body cavity searches will be conducted by gender specific staff (staff of the same gender) except in exigent circumstances. All staff received training in conducting patdown searches, counts, and unannounced rounds to help assure compliance with the standard that limits cross gender viewing and searches.
NOCC has also adopted ODOC Operations Policy, OP – 030601, Oklahoma, Prison Rape Elimination Act policy in its entirety. NOCC has a local procedure which details gender announcements. These announcements were made by a staff member of the opposite gender upon entering inmate housing, this was observed.
There are no female inmates at NOCC. This is a male facility. There are no transgender nor intersex inmates at NOCC. This facility has not received any cross gender, transgender or intersex offenders during this audit.
Interviews with staff and inmates confirmed that inmates can perform bodily functions, change clothing and shower without staff of the opposite gender completely viewing them. The interviews also confirmed the announcement of the opposite gender staff. Inmates and staff felt there was some sense of privacy
§115.16 – Inmates with Disabilities and Inmates who are Limited English
Proficient
☐ Exceeds Standard (substantially exceeds requirement of standard)
$ exttt{ iny}$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

The ODOC, through its departmental and institutional policies, addresses interpretation

services and special needs inmates.

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Inmates with disabilities, i.e. hard of hearing, blind or low vision, or who have intellectual, psychiatric, or speech 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.

The auditor reviewed the agency's interpreters list, the institutional handbook both English and Spanish versions, and the initial orientation handout of PREA information. Additionally, the activities/housing summary from medical with the corresponding job roster; along with a memo from health services concerning new arrivals/limited abilities were reviewed.

It is noted that NOCC is a minimum security facility with a "higher" medical grade for inmates due to limited medical facilities. There is a memo to the auditor that there are no deaf, vision-reading impaired or any disabled offenders, such that they cannot benefit from all aspects of the agency's PREA policy (OP – 030601, Oklahoma PREA).

In the past 12 months, there have been zero (0) number of instances where inmate interpreters, readers, or other types of inmate assistants have been used.

§115.17 – Hiring and Promotion Decisions

П	Exceeds S	Standard ((substantially	exceeds	requirement	οf	standard)
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☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Hiring and promotion decisions are made according to state and agency personnel policy at NOCC. Background checks for the promotions and hiring of employees, for the contractors, and the policy concerning background checks of current employees and contractors were reviewed by this auditor. These reviews reveal that before the hire of any new employee who has contact with inmates, a criminal background check is done. Additionally, agency policy requires a criminal background check to be conducted at least every five years and that there is a system in place to record such. Personnel files were reviewed. The Human Resource Manager was interviewed and it was evident that the agency policy and PREA requirement were being followed concerning hiring, promotion, and background checks.

Supporting documents for this standard also included the applicant questionnaire and background investigation form, the state of Oklahoma terms and conditions, and the appropriate personnel policies (OP – 110105, OP – 11 0210, OP – 11 0235, OP – 11 0237).

§115.18 – Upgrades to Facilities and Technology

			requirement		

 \boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

NOCC is not a new facility nor have they made substantial expansions or modifications of existing facilities since August 20, 2012.

Diagrams and schematics of the camera system at NOCC were reviewed. There are 4 pan/tilt/zoom cameras reviewing the north, south and east, sections of the compound. There are 28 fixed cameras established in building 1, building 2, building 3, building 4 (inmate housing viewing hallways), building 5, building 6, and building 8 (inmate housing viewing general dorm areas). The cameras are certainly sufficient for a minimum security institution and for the good order and operation of the facility. Camera views are, in this auditor's opinion, consistent with PREA law concerns.

Random inmate interviews revealed that the inmates felt safe.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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

The Oklahoma Department of Corrections is responsible for administrative and criminal sexual abuse investigations.

The agency, through its policy, OP – 030601, Oklahoma PREA stipulates "in incidents where it is conceivable that any physical evidence may exist the office of the Inspector General will be immediately contacted for sexual assault response determination prior to offenders being transported to sexual assault examination sites to undergo examination". Furthermore, the policy outlines General Investigatory Guidelines, investigative techniques, investigating sexual assaults to include preservation of evidence in recent sexual assaults, physical evidence victim, physical evidence offenders suspect, physical evidence crime scene, interviewing and reporting guidelines, and prosecutions. There are sexual violence and sexual misconduct and harassment check lists and forms attached to this policy in order to ensure documentation and proper evidence protocol and forensic medical examination. A review was made of this policy and its attachments which were, in this auditor's opinion, clear and comprehensive.

Forensic medical exams are conducted utilizing a SANE nurse at Grove Integris Hospital in Grove, Oklahoma. The facility also utilizes the Community Crisis Center in Miami, Oklahoma for victim advocacy and counseling. There is a signed Memorandum Of Understanding between NOCC and the crisis center.

There have been no forensic medical exams conducted during the past 12 months, and there had been no SANE nurse exams during the past 12 months.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ \ \ \ \ \ \ \ \ \ \ \ \ $
□ Does Not Meet Standard (requires corrective action)
The Oklahoma PREA policy insures referrals of allegations for investigation, documentation of reports of sexual abuse and harassment, and documentation of investigations, including full investigative report and findings. This policy ODOC Policy, OP – 030601 outlines the procedures for first responder duties, the immediacy of reporting, and follow up of sexual abuse incidences and crimes to the Office of the Inspector General.
Random interviews with staff and staff specific interviews with OIG investigators confirmed wide knowledge of the importance and steps of PREA investigations.
During the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received were 10. These 10 resulted in administrative investigations. Appropriate documentation, referrals, and follow up was reviewed and observed.
Appropriate documentation, referrals, and follow up was reviewed and observed.
§115.31 – Employee Training
§115.31 – Employee Training
§115.31 – Employee Training □ Exceeds Standard (substantially exceeds requirement of standard) □ Meets Standard (substantial compliance; complies in all material ways with the standard

All staff at NOCC who have contact with inmates and are employed by the facility have been trained. Training rosters, and the PREA training PowerPoint, were reviewed and PREA training is documented.

Inmate orientation to NOCC was observed. The inmate video on PREA was watched by the auditor with a group of about 18 inmates in orientation. All inmates receive this orientation within the 30 day timeframe. Many inmates were briefly interviewed and random inmates were selected from each housing unit and formally interviewed. During these interviews, scripted questions were asked and it was clear that all inmates were familiar with how to report sexual assault and sexual harassment and moreover, their rights to be free from sexual abuse and sexual harassment.

Touring the institution many inmates were stopped and asked if they were familiar with PREA reporting and if they knew what PREA meant or represented. Without exception, the inmate population was familiar in one way or another with PREA.

Handbooks were available, posters and other information is strategically placed throughout the institution, and brochures are handed out, through medical, educational, and unit departments.

During the past 12 months, 761 inmates were given PREA information, at intake. There were zero (0) inmates who did not receive comprehensive education within 30 days of intake.

§115.34 – Specialized Training: Investigations

3113.34 — Specialized Training. Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The Oklahoma Department of Corrections training policy along with training curriculum and personnel policy, requires investigators to be trained in conducting sexual abuse investigations in confinement settings.
The Office of the Inspector General conducts specialized training for its investigators. Currently there are 13 investigators employed who have completed the required training. The specialized investigation training PowerPoint was reviewed by the auditor. Training is documented.
Two investigators from the regional ODOC office center of the Inspector General's Office were interviewed with lengthy scripted questions, several addressing training. These interviews confirmed appropriate training.

§115.35 – Specialized training: Medical and mental health care

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
ODOC OP – 030-6601, Oklahoma PREA stipulates that medical and mental health "staff will be provided training to detect and assess signs of sexual abuse and/or predation, preserve evidence of sexual abuse, respond to sexual assault victims, and knowledge of department procedures in regard to PREA reporting process. Documentation shall be retained in the employees file."

Formal interviews were conducted with medical/mental health professionals and it was clear from these interviews, along with "acknowledgments" that the staff had been well-trained.

100% of all medical and mental health care practitioners who work regularly at this facility have received the required training.

§115.41 – Screening for Risk of Victimization and Abusiveness
☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The Oklahoma Department of Corrections, Oklahoma PREA policy OP – 030601, again addresses inmate screening information. This auditor, reviewing intake, found it clear through staff's use of the Cell Assessment form, and through the Self Report form that each issue regarding intake screening was addressed. Intake takes place within 72 hours and the New Arrival Security Review form in addition to the two forms mentioned above give the staff at NOCC a good idea of inmates at risk of being sexually abused by other inmates or sexually abusive towards other inmates.
NOCC is a small institution with inmates having only about 10 months left on their sentence to serve before being released. Thus, this group of offenders are literally on their "best behavior" knowing release is shortly forthcoming. So, interviews, both formal and informal with the inmates, were positive. The inmates were in agreement that they were well-trained in PREA, that PREA was a good thing for the prison system, and that they felt safe and secure at this minimum security facility as well as commenting they would be going home soon.
To the screening instrument and assessment tools used by ODOC they were thorough/comprehensive and gave insight to the staff at the facility. 108 inmates entering the facility within the past 12 months, whose length of stay was for more than 30 days, were reassessed for their risk of sexual victimization or of being sexually abusive, within 30 days after their arrival.

§115.42 – Use of Screening Information

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Interviews with intake and mental health staff, supported by interviews with inmates, as well as practice, observation, and documentation supports the appropriate use of screening information. Health care staff were especially concerned with privacy and confidentiality issues balancing the use of screening information with the goal of keeping inmates safe from
issues balancing the use of screening information with the goal of keeping inmates safe from abuse and harassment. There are no transgender or intersex inmates at NOCC.

The screening and assessment tools were observed to be a benefit to security and specialized staff in unit management, housing, and job assignments

Staff at this facility worked as a team to manage the operation, as well as to provide for custody, care and control of the inmate population.

§115.43 - Protective Custody

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
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The Oklahoma Department of Corrections has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing, unless an assessment of all available alternatives have been made. Again, policy OP – 030601, Oklahoma PREA.

As described before, this facility is minimum custody with a capacity of 525 men. Segregation cells (administrative and disciplinary) are very limited. There are only four segregation cells. If inmates were assessed for involuntary protective custody or assessed for protection, they would be transferred to another ODOC institution.

The number of inmates at risk of sexual victimization, who were held in involuntary segregated housing in the past 12 months for one or more hours while awaiting assessment or alternative placement was zero (0). This leads the auditor to believe that the screening and assessment tools used by ODOC are working for this minimum security facility.

§115.51 - Inmate Reporting

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
In this auditor's oninion inmate reporting is a central premise to eliminating rape in

In this auditor's opinion inmate reporting is a central premise to eliminating rape in correctional institutions. The ODOC, through its policy 0P – 030601, Oklahoma PREA, has established procedures for multiple internal ways for inmates to report privately to agency officials about sexual abuse or sexual harassment. The policy also allows the reporting of retaliation by other inmates for reporting, and staff neglect or violation of responsibilities that may have contributed to such incidents of sexual abuse or sexual harassment. Information on how to report is available in the Inmate Handbook, posters and flyers throughout the facility, on the agency PREA websites/links and by the emergency speed dial *73 posted on each inmate telephone dial.

A summary of how to report incidents of sexual assault or sexual abuse, including privately reporting, by using third parties, (family, friends, clergy, vendors, contractors, or any other person having knowledge of an incident) is in the Inmate Handbook and department policy. Additionally, posters, brochures and handouts all instruct how: to send an email, to call the PREA reporting line, to call the ODOC Office of the Inspector General, to report verbally to an

ODOC facility administrator, or to verbally report to a staff member. Finally, reporting can be accomplished by notifying the Oklahoma State Bureau of Investigation (OSBI). A Memorandum Of Understanding between the Oklahoma Department of Corrections and the Oklahoma State Bureau of Investigation was noted.

This standard "exceeds" based on the accessibility of the Warden and his unit management teams, the dial *73 on the inmate telephones, and the confidence the inmates relayed during interviews on their ability to report privately.

§115.52 – Exhaustion of Administrative Remedies

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

The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse along with a policy and procedure for filing emergency grievances alleging that an inmate is subject to substantial risk of imminent sexual abuse.

Agency policy OP – 090124, outlines The Offender Grievance Process. The Inmate Handbook also outlines the grievance procedure. It should also be noted that the inmate grievance process stipulates that upon receipt of the grievance marked "emergency" or "sensitive" the reviewing authority will have 24 hours to determine if it is in fact an emergency.

In the past 12 months, there have been no grievances filed alleging sexual abuse. Additionally, in the past 12 months, there have been no grievances alleging substantial risk of imminent sexual abuse.

§115.53 – Inmate Access to Outside Confidential Support Services

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

Oklahoma Department of Corrections makes available access to outside victim advocates for emotional support services related to sexual abuse.

NOCC through its Memorandum Of Understanding with Community Crisis Center, Miami, OK, makes available outside victim advocates. The auditor reviewed a copy of this agreement.

§115.54 – Third-Party Reporting	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
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□ Does Not Meet Standard (requires corrective action)	
Third-party reporting is accomplished through the offender grievance procedure OP – 090124, Emergency Grievances Related to Sexual Abuse which allows third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing administrative remedies to the allegations of sexual abuse.	
Third-party reporting is also accomplished through notification of the Office of the Inspector General, as well as through the Oklahoma State Bureau of Investigation. The ODOC website PREA, as outlined in standard 115.51, How to Report Incidents of Sexual Assault or Sexual Abuse, also provides this information.	
§115.61 – Staff and Agency Reporting Duties	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
$\ \ \ \ \ \ \ \ \ \ \ \ \ $	
□ Does Not Meet Standard (requires corrective action)	
The Oklahoma Department of Corrections OP – 030601, Oklahoma PREA outline staff and agency reporting steps. All staff are required to report immediately and in accordance with policy, any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred at a facility whether or not it is part of the agency.	
Interviews with staff, both formal and informal, revealed that they are aware of the step by step procedure to take concerning reporting incidences of sexual harassment and sexual abuse.	
Staff have been trained in how to report. The training has been documented.	
§115.62 – Agency Protection Duties	
☐ Exceeds Standard (substantially exceeds requirement of standard)	

ODOC, through its facility operations policy OP - 030601, Oklahoma PREA states in its' Zero Tolerance section, that when the agency learns an offender is subject to substantial risk of

☐ Does Not Meet Standard (requires corrective action)

imminent sexual abuse, it shall take immediate action to protect the offender. It also states in the policy that the correctional officer, first responder duties include initial reports and separation. This policy is comprehensive, thorough, and precise in outlining protection duties.

The institution and its' staff are very knowledgeable and well trained in these protection duties.

Random staff interviews, both formally and informally confirmed knowledge of these responsibilities.

At this minimum security facility, during the past 12 months, the number of times the agency facility determined that an inmate was subject to a substantial risk of imminent sexual abuse was zero (0).

§115.63 – Reporting to Other Confinement Facilities

Exceeds Standard (substantially exceeds requirement of stand
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☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, it is required by policy that the Warden of the facility that received the inmate must immediately notify the facility where the sexual abuse is alleged to have occurred. This is stipulated in the policy OP – 030601, Oklahoma PREA. During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was zero (0). In the past 12 months, there have been no allegations of sexual abuse received from other facilities regarding inmates transferred from the NOCC.

§115.64 – Staff First Responder Duties

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☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

One of the most important duties that face nonsecurity staff and correctional officers is the responsibility of being a first responder. The Oklahoma Department of Corrections outlines in the Oklahoma PREA OP – 030601, the procedures and action for first responders to an allegation of sexual abuse.

A correctional officer first responder is trained to:

1) separate the alleged victim and abuser,

- 2) preserve and protect any crime scene,
- 3) request that the alleged victim not take any actions that could destroy physical evidence if abuse occurred within a time frame that still allows for collection of physical evidence,
- 4) ensure that the alleged abuser does not take any action that could destroy physical evidence if abuse occurred within a time frame that still allows for collection of physical evidence,

The policy details each of the steps above. If the first responder is not a security officer their steps are also outlined, mainly, notify their supervisor.

Random formal and informal interviews with staff, investigative staff, and higher intermediate level supervisors, confirmed staff was knowledgeable of first responder responsibilities.

In the past 12 months, the number of allegations that an inmate was sexually abused was zero (0).

§115.65 – Coordinated Response

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

Standard 115.65, Coordinated Response stipulates that the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

The auditor feels this standard, meets and "exceeds" rating based on two impressive issues:

1) NOCC has written its own policy 030601 – 01 that details local processes and staff assignments at the institutional level. This 18 page policy covers many issues that are particular to NOCC. This is a small, close-knit facility with a small staff. Teamwork and cooperation is essential to establishing a coordinated response. Through this policy it is obvious the facility makes every effort to coordinate first responders, medical and mental health practitioners, investigators, and facility leadership. 2) The leadership of the Warden is so evident in his team approach to resolving PREA issues for the inmate that the coordinated response is not only a responsibility, but is a duty and his example leads the way to do it well, and to do it as a team.

A leadership and team issue that exceeds.

§115.66 – Preservation of ability to protect inmates from contact with abusers

	abusers
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	□ Does Not Meet Standard (requires corrective action)
	Not Applicable ■ Not Applicable Not Applicable
rer	ntral office reported there has been no collective bargaining agreement entered into or newed since August 2012. Memo to the auditor indicates that this standard is not applicable. ither the ODOC nor Northeast Oklahoma Correctional Center is a union organization.
	§115.67 – Agency protection against retaliation
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	□ Does Not Meet Standard (requires corrective action)
	The agency/NOCC's policy protects all inmates and staff who report sexual abuse or sexual harassment and who cooperate with sexual abuse or sexual harassment investigations from retaliation by other staff or inmates.
	Personnel policies covering sexual harassment and sexual misconduct also protect against retaliation.
	Staff and inmate interviews confirmed knowledge of these protections and compliance with the standard.
	There have been zero (0) number of times an incident of retaliation occurred in the past 12 months.
	§115.68 – Post-Allegation Protective Custody
	3113.00 TOSE-Anegation Frotective Custody
	□ Exceeds Standard (substantially exceeds requirement of standard)
	□ Does Not Meet Standard (requires corrective action)
	ODOC/NOCC has policy prohibiting the placement of inmates who allege to have suffered sexual abuse, in involuntary segregation housing, unless an assessment of all available alternatives have been made. Any use of segregated housing to protect an inmate who is

alleged to have suffered sexual abuse shall be subject to the requirements of 115.43.

As stated before, NOCC is a minimum security facility with only four segregation cells. Thus, any protective custody, any segregation, any involuntary protective custody would be used very sparingly and very judiciously.

There have been zero (0) number of inmates who allege to have suffered sexual abuse, who were held in involuntary segregated housing in the past 12 months.

§115.71 – Criminal and Administrative Agency Investigations

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	andard (s	ubstantial	compliance;	complies in	all material	ways with	the star	ndard
for the relev	vant revie	w period)						

☐ Does Not Meet Standard (requires corrective action)

☐ Exceeds Standard (substantially exceeds requirement of standard)

The Oklahoma Department of Corrections policy OP – 030601, Oklahoma PREA and the Oklahoma Department of Corrections policy security investigations OP – 040117, details general investigatory guidelines. All case records associated with claims of sexual assault, including incident reports, investigation reports, offender information, and case disposition are retained in the OIG investigation file. These policies also discuss investigative techniques, investigating sexual assaults, preservation of evidence in recent sexual assault crime scenes, interviewing and reporting guidelines, prosecutions, tracking of confirmed sexual assault predators, medical and mental health responsibilities and review teams.

There were zero (0) number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012.

Two investigators of the Office of the Inspector General were interviewed and confirmed procedures for criminal and administrative investigations substantiating compliance with the standard.

§115.72 – Evidentiary Standard for Administrative Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
ODOC uses a preponderance of the evidence standard for determining whether are not an

allegation is substantiated or unsubstantiated or unfounded. From the Oklahoma PREA policy OP – 030601, "there shall not be any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated".

The two investigators interviewed, who work for the OIG, confirmed this standard of evidence during the formal interview questions.

§115.73 – Reporting to Inmate ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Again the auditor used ODOC's Oklahoma PREA policy OP – 030601, to establish the facility's responsibility of reporting to the inmate. The facility head or designee shall inform the offender victim, at the conclusion of the investigation, whether the allegation of sexual abuse has been determined to be substantiated, unsubstantiated or unfounded. If it is a staff member, the facility head or designee shall inform the offender victim whenever a staff member is no longer posted, employed, or has been indicted or has been convicted, unless the investigation determines the allegation is unfounded. There is an attachment D checklist, in the policy for notifications to offenders and to make sure there is documentation incorporated in the OIG investigative files. §115.76 – Disciplinary sanctions for staff ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Personnel policy of the ODOC, section 11, Human Resources, OP – 110415, progressive Disciplinary Procedures outlines disciplinary sanctions. The presumptive disciplinary sanction for staff who have engaged in sexual abuse of an offender is termination. This is further outlined in policy under Prohibited Conduct addressing inappropriate sexual conduct, invasion of privacy, sexual assault, and goes further to describe duties and responsibilities in regard to PREA. NOCC has had zero (0) number of staff from the facility who have been terminated for violating agency sexual abuse or sexual harassment policies in the last 12 months. §115.77 – Corrective action for contractors and volunteers ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

The agency/NOCC holds volunteers and contractors who would engage in sexual abuse to similar standards as employees - investigation, termination, and reported to law enforcement, unless clearly not criminal.

☐ Does Not Meet Standard (requires corrective action)

Volunteers have all been trained at NOCC and are aware of these policies. Volunteers have signed acknowledgment forms, and documentation is maintained.

In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates is zero (0).

§115.78 - Disciplinary sanctions for inmates ☐ Exceeds Standard (substantially exceeds requirement of standard)

☑ Meets Standard (substantial compliance; complies in all material ways with the standard)

for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

The Oklahoma Department of Corrections, Department Offender Disciplinary Procedures, section 06 Classification, OP – 060125, and its attachments defines all offender disciplinary rule violations and specifies the allowable range of disciplinary sanctions authorized by ODOC for each violation.

Acts Constituting Rule Violations details offenses and stipulates the classes of each offense.

The agency prohibits all sexual activity between inmates.

In the past 12 months, there has been zero (0) number of administrative findings, and zero (0) number of criminal findings of guilt, of inmate on inmate sexual abuse that have occurred at NOCC.

§115.81 – Medical and mental health screenings; history of sexual abuse

□ Exceeds Standard ((substantially	exceeds re	equirement	of standard
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☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Well managed medical and mental health departments, appropriate staffing of medical and mental health departments, and dedicated staff of medical and mental health departments established the basis for good, individual custody, care, and control. Based on staff interviews of the health and mental health departments, as well as review of their operating procedures and observation of their day-to-day duties, this auditor found NOCC to have a dedicated and well-managed (albeit small) health care team.

All inmates at this facility who have disclosed any prior sexual victimization during a screening are offered a follow-up meeting with medical or mental health practitioners. All inmates who have previously perpetrated sexual abuse are offered a follow-up meeting.

Review of several documents support the screening process and the thoroughness of the healthcare/security assessment. These documents include Intra—facility Health Screening

form, Cell Assessment form, New Arrival Security Review, and the Personal Health Information form.

There was a memo to the auditor that NOCC has not received any reported incidents of offenders sexually abused at other institutions or jails during this audit period.

§115.82 – Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)	
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
As outlined in the facility description, health services provide emergency care 24 hours per day, seven days a week. On-call health care personnel are contacted or after hour emergencies and/or 911 services from the Vinita, Oklahoma community are available.	
The agency's operation. Policy OP 030601 Oklahoma PREA, under the ODOC Medical Services Responsibility section, outlines these health services. Further detailing of medical services is outlined in its' policy OP – 140118, entitled Emergency Care.	
The local contact hospital for emergencies is Craig General Hospital. NOCC utilizes Grove Integris Hospital for a SANE nurse. The 911 emergency services response time is approximately 5 minutes. Treatment services are provided to every victim without financial cost.	
NOCC is an adult male facility.	
§115.83 – Ongoing medical and mental health care for sexual abuse	
victims and abusers	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
NOCC offers medical and mental health care and treatment, as appropriate, to all inmates	

Progress notes, treatment plans, and interviews with health care staff confirmed the ongoing medical and mental health care for sexual abuse victims and for abusers.

Ongoing medical/mental health treatment is available to all victims as outlined in the Offender's Guide to Sexual Misconduct, attachment B, OP 030601, Oklahoma PREA.

who have been victimized by sexual abuse and for abusers.

§115.86 – Sexual abuse incident reviews

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
This standard is evaluated as exceeding standards based on interviews with the Warden, the Health Services Administrator, the Chief Psychologist, higher level staff and review of the monthly documentation of the review team at NOCC. The facility has a review team, comprised of the Warden, Deputy Warden, Chief of Security, PREA Compliance Manager, medical and mental health staff, and unit management staff.
The review team reviews not only sexual abuse incidents, but also alleged sexual abuse incidents, and alleged sexual harassment incidents. The team reviews the following:
 The need to change policy or practice Motivation Physical barriers/area Staffing levels Monitoring technology.
The team prepares a report of their findings and implements recommendations for improvement as determined.
Interviews with these staff and recognition of their personal commitment to PREA compliance, institutional teamwork, personal professionalism, and facility betterment earns this "exceeds" standards.
§115.87 – Data Collection
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The Office of the Inspector General collects accurate, uniform data for every allegation of sexual abuse at facilities of the Oklahoma Department of Corrections. The data is securely retained. The agency aggregates this incident-based sexual abuse data, at least annually.

The Oklahoma Department of Corrections website/ODOC PREA Policy contains this incident-based data.

The agency report includes the data necessary to answer questions from the Survey of Sexual Violence (SSV).

§115.88 – Data Review for Corrective Action
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The ODOC annual report and monthly reports from the facility are used by Northeast Oklahoma Correctional Center to improve the effectiveness of its' sexual abuse prevention, detection, and response policies and training, including identifying problem areas, and taking corrective action on an ongoing basis.
The Oklahoma Department of Corrections PREA data for 2012 and 2013 is included in its annual report of sexual violence. There are annual reports for both state prisons and contracted private prisons.
The auditor reviewed the agency's annual reports and the SSV report.
§115.89 – Data Storage, Publication, and Destruction
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
The Oklahoma Department of Corrections, through its policy OP – 030601, Oklahoma PREA ensures that all aggregated sexual abuse data from facilities under its direct control and for private facilities with which it contracts, is available to the public and securely retained. The ODOC maintains sexual abuse data pursuant standard 115.87 for at least 10 years after the initial date of collection, unless federal, state or local law requires otherwise.
The Office of the Inspector General, PREA section, is responsible for gathering and maintaining this information.
Public access to data is available on the ODOC website.
AUDITOR CERTIFICATION:
The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.
Tames Curington01/08/2015

Auditor Signature

PREA AUDIT: AUDITOR'S SUMMARY REPORT

Date