PREA Facility Audit Report: Final

Name of Facility: John H. Lilley Correctional Center
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 08/04/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☑
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☑
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.	☑
Auditor Full Name as Signed: Valerie Wolfe Mahfood	**Date of Signature:** 08/04/2026

AUDITOR INFORMATION	
Auditor name:	Mahfood, Valerie Wolfe
Email:	wolfemahfood@aol.com
Start Date of On-Site Audit:	06/18/2026
End Date of On-Site Audit:	06/20/2026

FACILITY INFORMATION	
Facility name:	John H. Lilley Correctional Center
Facility physical address:	407971 Highway 62 East , Boley , Oklahoma - 74829
Facility mailing address:	

Primary Contact

Name:	Terry Tuggle, Warden
Email Address:	terry.tuggle@doc.ok.gov
Telephone Number:	405-590-3871

Warden/Jail Administrator/Sheriff/Director	
Name:	Terry Tuggle, Warden
Email Address:	terry.tuggle@doc.ok.gov
Telephone Number:	405-590-3871

Facility PREA Compliance Manager	
Name:	Terry Tuggle
Email Address:	terry.tuggle@doc.ok.gov
Telephone Number:	405-590-3871

Facility Health Service Administrator On-site	
Name:	Kathy Thomas, Nurse Manager
Email Address:	kathy.thomas@doc.ok.gov
Telephone Number:	405-401-2664

Facility Characteristics	
Designed facility capacity:	836
Current population of facility:	876
Average daily population for the past 12 months:	830
Has the facility been over capacity at any point in the past 12 months?	Yes
What is the facility's population designation?	Men/boys

Age range of population:	18 - 91
Facility security levels/inmate custody levels:	Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	109
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	3
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	519

AGENCY INFORMATION	
Name of agency:	Oklahoma Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	4345 North Lincoln Boulevard, Oklahoma City, Oklahoma - 73105
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Miciah Ahrnsbrak	**Email Address:**	miciah.ahrnsbrak@doc.ok.gov

Facility AUDIT FINDINGS

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:	
14	• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.13 - Supervision and monitoring • 115.15 - Limits to cross-gender viewing and searches • 115.16 - Inmates with disabilities and inmates who are limited English proficient • 115.17 - Hiring and promotion decisions • 115.18 - Upgrades to facilities and technologies • 115.31 - Employee training • 115.32 - Volunteer and contractor training • 115.33 - Inmate education • 115.41 - Screening for risk of victimization and abusiveness • 115.51 - Inmate reporting • 115.54 - Third-party reporting • 115.86 - Sexual abuse incident reviews

	• 115.401 - Frequency and scope of audits
Number of standards met:	
31	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-06-18
2. End date of the onsite portion of the audit:	2026-06-20

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?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International and Sac & Fox Nation

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	836
15. Average daily population for the past 12 months:	830
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	( ) Yes (●) No ( ) 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	
23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	868
25. 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:	210
26. 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:	106
27. 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:	2
28. 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:	2
29. 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:	6
30. 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:	27

31. 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:	3
32. 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:	0
33. 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:	0
34. 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:	0
35. 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):	Inmates were allowed to self-select out of and/or into all targeted categories during the interview process. As such, while facility records may or may not include inmates within targeted categories, targeted protocols were still completed for any inmate who self-selected into any targeted protocol at the time of the interview. Also, it should be noted that if there were not sufficient numbers of inmates assigned to the facility within a targeted group, oversampling was done in other targeted groups to ensure the minimum number of targeted interviews were conducted.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	114

37. 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:	61
38. 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:	4
39. 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:	NA

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	17
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☑ Age ☑ Race ☑ Ethnicity (e.g., Hispanic, Non-Hispanic) ☑ Length of time in the facility ☑ Housing assignment ☑ Gender ☑ Other ☐ None

If "Other," describe:	Custody, Job Assignment, Program Activity, Physical Characteristics, Psychological Characteristics, Primary Language Spoken, or other distinguishing factors amongst the inmate population.
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Housing rosters
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	(●) Yes ( ) No
44. 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):	No barriers to completing random inmate interviews were noted. No inmates refused the opportunity to interview.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	15
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".	
47. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	7

48. 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:	4
49. 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:	1
50. 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:	1
51. 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:	1
52. 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:	6
53. 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:	3

54. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	Reviewed facility documentation, to include current housing rosters by name. All inmates interviewed were also asked if they had filed reports of sexual abuse while assigned to the facility. None of the inmates interviewed stated that they had filed any such reports.
55. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	Reviewed facility documentation. All inmates interviewed were also asked if they had ever disclosed prior sexual victimization to agency staff. None of the inmates interviewed stated that they had ever done so.

56. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	Reviewed facility documentation. Asked staff if inmates were placed in segregated housing for the risk of sexual victimization or for having alleged to have been a victim of sexual abuse. Asked all inmates who reported sexual abuse or sexual victimization if they had ever been placed in segregated housing for the risk of sexual victimization or for having alleged to have been a victim of sexual abuse. Both staff and inmates responded in the negative. Reviewed current assignment rosters, as well as interviewed inmates having previously disclosed sexual abuse or having filed sexual abuse/ harassment allegations to determine if said inmates had been placed in segregation for filing said allegations.

57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Inmates were allowed to self-select out of and/or into all targeted categories during the interview process. As such, while facility records may or may not include inmates within targeted categories, targeted protocols were still completed for any inmate who self-selected into any targeted protocol at the time of the interview. Also, it should be noted that if there were not sufficient numbers of inmates assigned to the facility within a targeted group, oversampling was done in other targeted groups to ensure the minimum number of targeted interviews were conducted.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☑ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☑ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	Gender, race, ethnicity, languages spoken, or other distinguishing factors amongst staff relative to their employment.
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No

61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No barriers to completing random staff interviews were noted.
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.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	11
63. Were you able to interview the Agency Head?	(●) Yes ( ) No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	(●) Yes ( ) No
65. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
66. Were you able to interview the PREA Compliance Manager?	(●) Yes ( ) No ( ) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	☑ Agency contract administrator ☑ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment ☐ Line staff who supervise youthful inmates (if applicable) ☐ Education and program staff who work with youthful inmates (if applicable) ☑ Medical staff ☑ Mental health staff ☐ Non-medical staff involved in cross-gender strip or visual searches ☑ Administrative (human resources) staff ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff ☑ Investigative staff responsible for conducting administrative investigations ☑ Investigative staff responsible for conducting criminal investigations ☑ Staff who perform screening for risk of victimization and abusiveness ☑ Staff who supervise inmates in segregated housing/residents in isolation ☑ Staff on the sexual abuse incident review team ☑ Designated staff member charged with monitoring retaliation ☑ First responders, both security and non-security staff ☑ Intake staff

	☑ Other
If "Other," provide additional specialized staff roles interviewed:	Commissary, Laundry, Mailroom Staff, Chaplain, and SAFE/SANE staff associated with the local hospital/rape crisis center
68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☑ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☐ Medical/dental ☑ Food service ☐ Maintenance/construction ☑ Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	At the time of the onsite audit, the weren't any volunteers present. However, attempts were made to communicate with all volunteers who had emails on file with the facility. Of which, only one volunteer responded to the auditor's query.

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.

71. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
72. 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
73. 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
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No

75. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No
76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	NA

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.

77. 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?	(●) Yes ( ) No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Additional document sampling was done both at random, as well as in coordination with comments received from inmates and staff during the interview process.

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.

79. 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

80. 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	1	0	1	0
Total	1	0	1	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.

81. 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

82. 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	0	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.

83. 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

84. 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	1	0
Total	0	0	1	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. 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:	No allegations of sexual abuse filed within the audit time frame.

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	○ Yes ○ No ◉ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	◉ Yes ○ No ○ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	NA

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. 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.	○ Yes ◉ No

Non-certified Support Staff	
103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No
AUDITING ARRANGEMENTS AND COMPENSATION	
108. Who paid you to conduct this audit?	○ The audited facility or its parent agency ○ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ◉ A third-party auditing entity (e.g., accreditation body, consulting firm) ○ Other
Identify the name of the third-party auditing entity	Corrections Consulting Services (f/k/a PAOA)

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.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documentation: · Oklahoma Department of Corrections (ODOC), OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC Organizational Chart, 3-5-24 · ODOC Offender Orientation Manual, English: January 2012 · ODOC Inmates' Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 · ODOC PREA Poster for Employees · ODOC PREA Poster for Inmates and Visitors

· John Lilley Correctional Center (JLCC) Organizational Facility Chart, 2026

· JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25

· JLCC Memo, 115.11, Statement of Facts, 2-9-26

Interviews:

· Agency Head

· Agency PREA Coordinator

· Warden

· PREA Compliance Manager

· Intermediate or Higher-Level Facility Staff

· Random Staff

Site Review Observations:

· The Oklahoma Department of Corrections (ODOC) PREA Coordinator oversees the John Lilley Correctional Center (JLCC) PREA program.

· The JLCC PREA Compliance Manager is physically assigned to the JLCC and maintains a permanent office, with routine activities, within said institution as a function of assignment.

Standard Subsections:

(a) The agency does have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities that it operates directly or under contract. Specifically, the ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21, outlines how the “ODOC maintains a zero tolerance for inmate-on-inmate sexual assault, staff sexual misconduct and sexual harassment toward inmates.” In doing so, this policy clearly defines prohibited behaviors regarding sexual abuse and sexual harassment, including sanctions for those found to have participated in these behaviors. As noted by the PREA Coordinator, this policy also discusses agency strategies to reduce and prevent the sexual abuse and sexual harassment of inmates.

(b) The ODOC has employed an agency-wide PREA Coordinator, whose position is within the agency's upper-level organizational structure. As this individual's job responsibilities lie strictly with ensuring the agency's compliance of its PREA program, this individual does have both sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards.

(c) The ODOC operates multiple correctional facilities. As such, each facility, to include the John Lilley CC, has designated a PREA Compliance Manager. The John Lilley CC PREA Compliance Manager (PCM) has affirmed having sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards.

Reasoning & Findings Statement:

This standard establishes agency expectations of zero-tolerance for sexual abuse and sexual harassment of inmates. In developing these expectations, the ODOC has created specific policies to prevent, detect, and respond to allegations of sexual abuse and sexual harassment of inmates. The agency has designated an upper-level agency-wide PREA Coordinator to oversee its zero-tolerance program. Lastly, the John Lilley CC has designated two PCMs to help prevent, detect, and respond to allegations of sexual abuse. The John Lilley CC PREA Compliance Manager, has affirmed having sufficient time and authority to coordinate the facility's efforts to comply with the agency's zero-tolerance policy. In doing this, the John Lilley CC has further developed its own unit based coordinated response plan to ensure the agency's overall zero-tolerance policy is applicable to any unique circumstances of the individual facility. In developing these mandatory positions and policies, the ODOC, and by extension the John Lilley CC, have exceeded the requirements of this standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC Website, Contracted Facilities, 12-16-24

	· ODOC Bridgeway MOU Amendment, 1-22-24 · ODOC Bridgeway Halfway House PREA Audit Report, 5-18-24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Memo, Standard 115.12, 2-11-26 Interviews: · Agency PREA Coordinator · Agency Contract Administrator Site Review Observations: · The JLCC is a publicly operated correctional facility through the Oklahoma Department of Corrections. Standard Subsections: (A) The ODOC is a public agency that currently contracts for the confinement of its inmates with only one private entity: namely, Bridgeway, Inc. Halfway House. Per the Agency Contract Administrator, all contracts with these entities require said facilities to adopt and comply with the Prison Rape Elimination Act, National Standards to Prevent, Detect, and Respond to Prison Rape. (B) Per the Agency Contract Administrator, these contracts also provide for agency contract monitoring to ensure that the contracted entity does comply with the PREA standards and further notes that the agency shall ensure that contractors have been trained on their responsibilities under the ODOC's policy on sexual abuse and sexual harassment prevention, detection and response. Reasoning & Findings Statement: This standard requires that all private entities contracting with the ODOC must

	comply with the PREA Standards. As evidenced by the ODOC PREA Audit Schedule and demonstrated through the public posting of facility audits via the ODOC website, all contracted facilities have been audited for their compliance with the PREA Standards. As indicated by documentation review, as well as affirmed by conversations with agency staff, the ODOC does require that any contracted entity maintains those within its custody in accordance with the agency's zero-tolerance policy on sexual abuse and sexual harassment of inmates. To ensure said compliance, the ODOC provides for an agency liaison for facility-based contract monitoring and to ensure all employees, contractors, and volunteers who have contact with inmates have been properly trained on the agency's zero-tolerance policy specific to the prevention, detection, and response of allegations regarding sexual abuse and harassment within contracted facilities. As such, the ODOC, and by extension the John Lilley CC, has satisfied all provisions within this standard.

115.13	**Supervision and monitoring**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040601, Body Worn Camera, 2-18-25 · ODRC Picture of Body Worn Camera Required for All Uniform Staff · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Staffing Plan, 2-17-26 · JLCC Staffing Plan Development Memo, 2-28-25 · JLCC Master Roster, August 17, 2025 – August 17, 2026 · JLCC Critical and Priority Chart, 3-3-26 · JLCC Facility Camera Overlay · JLCC Log Book, Unit One: 1-2-26, 1-3-26 · JLCC Log Book, Unit Two: 2-11-26, 2-19-26 · JLCC Log Book, Unit Three: 1-8-6, 1-14-26 · JLCC Log Book, Unit Four: 1-7-26, 1-14-26

Interviews:

- Agency PREA Coordinator
- Facility Warden
- PREA Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Random Inmates

Site Review Observations:

- All inmate housing areas contain at least one security staff post that is continuously monitored by staff. All areas of high inmate traffic are assigned permanent staffing positions while in operation.
- During the site review, supervisory staff were observed making routine and frequent rounds throughout the facility. All random staff interviewed did indicate that supervisory staff were available to them and routinely conducted unannounced rounds within the facility.
- During supervisory rounds, ranking officials were observed reviewing required documentation completed by line staff as a function of their duty posts.
- During the onsite portion of the audit, current chronological building logs were inspected throughout the facility to ensure staff were conducting, and properly documenting, unannounced rounds and, were appropriate, opposite gender announcements.

Standard Subsections:

(A) As noted by the PREA Coordinator, each facility shall develop, document, and make its best efforts to comply with a staffing plan that provides for adequate levels of staff and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating staffing levels and determining the need for video monitoring, the institution shall consider:

	· Generally accepted correctional practices, · Any judicial, federal investigative and internal/external oversight agency findings of inadequacy, · The facility's physical plant including blind-spots or areas where staff or inmates may be isolated, · The composition of the inmate population, · The number and placement of supervisory staff, · Institutional programs occurring on a particular shift, · The prevalence of substantiated and unsubstantiated incidents of sexual abuse, · Applicable state or local laws, regulations, standards, · And any other relevant factors. The John Lilley CC has developed a staffing plan so that adequate staffing levels are routinely available to ensure the custody and safety of all inmates housed within the facility. Since the last PREA Audit, the John Lilley CC has maintained an average of 829 inmates assigned to the facility. The John Lilley CC staffing plan was predicated on having 837 inmates assigned to the facility. During interviews with random staff, said employees consistently remarked that supervisory staff were routinely conducting unannounced rounds and were available to them when needed. As well, all inmate interviews indicated that supervisory staff were routinely conducting unannounced rounds. Additionally, there weren't any (0) inmates who indicated that they were unable to attend routine activities on a regular basis due to a shortage of staff. (B) As noted by the John Lilley CC Warden, if circumstances arise where the staffing plan is not complied with, the facility would document and justify that deviation on the shift roster. However, during the audit time frame, the John Lilley CC has not deviated from the facility staffing plan. As noted by the John Lilley CC Warden, all deviations, when they occur, are documented as required. (C) As noted by the John Lilley CC Facility Administrator and PREA Coordinator, at least annually, the facility, in consultation with the agency PREA coordinator, reassesses the facility staffing plan, the facility's deployment of video monitoring technologies, and the facility resources to determine if adjustments are needed. As affirmed by the John Lilley CC Facility Administrator, and confirmed by the ODOC PREA Coordinator, the John Lilley CC does conduct an annual assessment of its staffing plan. A review of the John Lilley CC last staffing plan does evidence adherence to this requirement.

	(D) Agency policy (OP-030601) requires that “each facility shall ensure written policy and practice of having intermediate level or higher-level supervisors conduct and document unannounced rounds during day and night shifts to identify and deter staff sexual abuse and sexual harassment.” The timing of the onsite portion of the audit allowed for the observation of staff from all shifts. In this, it was noted that unannounced rounds were properly documented by both line and supervisory staff. As well, numerous housing and officer station logs were reviewed onsite. These logs reflected a historic pattern of supervisory presence throughout the facility. Additionally interviews with supervisory staff confirm that unannounced rounds are being conducted as required for all shifts. These rounds are conducted at random, using different timing intervals, travel patterns, and other means to make the presence of supervisory staff less predictable. Lastly, as required by policy (OP-030601) “staff are prohibited from alerting other staff member that these supervisory rounds are occurring unless such announcement is related to the legitimate operational function of the facility.” Interviews with random staff reflect their awareness of policy prohibiting them from notifying co-workers that said rounds are occurring. As well, interviews with all random inmates all indicated that supervisors are routinely walking about the facility. During the onsite portion of the audit, it was further observed that both staff and inmates seemed comfortable with the presence of supervisory staff within department and housing areas; thus, further supporting the fact that supervisory staff are routinely present throughout the facility. Reasoning & Findings Statement: The standard provides that adequate staffing levels are assessed and maintained, as well as video monitoring technology is used to its fullest potential to promote the safety of not only the inmates assigned to the facility, but also the well-being of all correctional employees, contractors, and volunteers within the compound. The John Lilley CC does conduct an annual assessment of its staffing levels, which was last completed on February 17, 2026. During the audit time frame, the John Lilley CC has not deviated from its staffing plan. Supervisory staff note, as well as documentation confirms, that unannounced rounds are being conducted on a regular and routine basis. Both random staff and inmates all agree that supervisor rounds are routinely conducted. Lastly, despite the John Lilley CC having hundreds of stationary video cameras throughout its institutional grounds, to take full advantage of monitoring technologies, uniform officers also wear body cameras attached to their shirts. As such, the John Lilley CC facility has clearly exceeded the compliance requirements of this standard.

115.14	**Youthful inmates**

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC #OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC #OP-030102, Inmate Housing, 9-23-22 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: • Agency PREA Coordinator • Facility Warden • PREA Compliance Manager • Random Staff • Random/Targeted Inmates Site Review Observations: • While conducting the onsite review, the auditor did not observe any inmates who appeared excessively youthful. • In reviewing inmate documents, the auditor did not observe any birthdays to be less than 18 years before the date of the onsite review. • All inmates interviewed stated that they were at least 18 years of age and/or did not have any knowledge of any inmate currently assigned to the John Lilley CC who was not at least 18 years of age. Standard Subsections: (A) Agency policy (OP-030102) prohibits the placement of any inmate less than 18

	years of age in a housing unit within sight or sound of any inmate over the age of 18 years. As well, inmates less than 18 years of age may not have any physical contact with inmates over the age of 18 years by way of a shared dayroom or other common space, shower area, or sleeping quarters. Agency policy (OP-030102). Specifically, policy notes that “inmates housed at JHCC and JLCC will be housed separately or with other inmates who are 17 years of age or younger to provide direct supervision and ensure safety and security.” In speaking with the PCM, it was noted that the JLCC does not house youthful inmates. As such, there weren’t any housing areas to inspect. (B) Agency policy (OP-030102) further requires “direct supervision will be provided from security staff for youthful offenders” if inmates less than 18 years of age are within sight or sound of inmates who are 18 years of age or older. In speaking with the PCM, it was noted that the JLCC does not house youthful inmates. As such, there weren’t any housing areas to inspect. (C) Agency policy (OP-030102) requires that “best efforts will be made to avoid placing youthful offenders in isolation, unless warranted.” In speaking with the PCM, it was noted that the JLCC does not house youthful inmates. As such, there weren’t any housing areas to inspect. Reasoning & Findings Statement: This standard requires that the agency ensures sight and sound separation between inmates less than 18 years of age and inmates more than 18 years of age. Alternatively, the standard requires that there is direct staff supervision when inmates less than 18 years of age and inmates of at least 18 years of age have the possibility of sight, sound, or physical contact. In speaking with the PCM, it was noted that the JLCC does not house youthful inmates. As such, there weren’t any housing areas to inspect. The John Lilley CC has, therefore, met all of the requirement of this standard.

115.15	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents:

	· ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040102, Master Roster and Post Order Guidelines, 11-29-21 · ODOC, OP-040110, Search and Seizure Standards, 8-10-22 · ODOC, OP-050109, Reporting of Incidents, 3-39-22 · ODOC, OP-030601, Recreation Activity Programs, 6-7-22 · ODRC Privacy Notice, Female Facilities: Japanese · ODRC Privacy Notice, Male Facilities: Korean · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Employee Search and Seizure Training: 2025, 2026 · JLCC PREA Staff Training Acknowledgement: 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, · 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26 · JLCC Employee Search and Seizure Training: 2025, 2026 · JLCC Cell, Area, Pat Searches Class Rosters: 3-2-26, 3-24-26, 5-11-26, 5-18,26, 6-16-26, 6-18-26, 7-7-26, 7-9-26, 7-21-26, 7-27-26, 7-29-26 Interviews: · JLCC Facility Administrator · JLCC PREA Compliance Manager · Intermediate or Higher-Level Facility Staff · Random Staff · Random Inmates · Inmates Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex

Site Review Observations:

· During the onsite inspection, staff were routinely observed making cross-gender announcements when persons of the opposite gender entered inmate housing areas.

· Supervisory staff were observed conducting their routine security checks within inmate housing areas. Cross-gender announcements and supervisory rounds, both unannounced rounds and scheduled rounds, were subsequently documented on chronical activity logs.

· Privacy shields were in place inhibiting view into all inmate toilets.

· Privacy shields were observed and/or available in medical examination rooms.

· Privacy curtains were observed in all shower areas.

· Video surveillance was not trained to areas where inmates might routinely be in a state of undress.

Standard Subsections:

(A) Agency policy (OP-040102) requires that “a person of the same gender of the inmate will be available to perform gender specific tasks (i.e. strip and visual body cavity searches).” Per the JLCC PCM, during the audit time frame, there have not been any (0) cross-gender strip or cross-gender visual body cavity searches conducted. Random staff interviews confirm that staff do not conduct such searches. As well, interviews with random inmates did not suggest that staff have ever conducted cross-gender strip or visual body cavity searches.

(B) Agency policy (OP-040102) requires that “a person of the same gender of the inmate will be available to perform gender specific tasks (i.e. strip and visual body cavity searches).” The JLCC is a male facility. Accordingly, the facility has not conducted any cross-gender searches of female inmates.

(C) Agency policy (040110) requires that “all cross-gender strip searches and any cross-gender body cavity searches shall be documented… Any cross-gender pat searches of inmates will be documented.” As noted by the JLCC PCM, staff at the facility have not engaged any cross-gender strip searches of its inmates during the audit time frame. Nonetheless, all random staff interviewed understood that under exigent circumstances, should the need arise, such searches would require

	justification. All random inmates interviewed noted that they had never been required to be in a state of undress while in the presence of opposite gender staff. (D) The agency has a policy (030601) in place that allows inmates “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.” Random staff interviewed confirmed adherence to agency’s opposite gender announcement policy (030601), which requires that “at the beginning of each shift an announcement is made in the housing units notifying inmates that staff of the opposite gender will enter or be present on the housing unit during the shift. When the gender of the staff on the housing unit changes to the opposite gender, a notification will be made to inmates announcing the staffing change.” When interviewed, all opposite-gender staff confirmed their routine performance of opposite gender announcements. As well, all but two (2) interviewed inmates stated that opposite gender staff do not routinely engage opposite gender announcements. During the facility site review, modesty barriers and curtains were in place to inhibit the viewing of any inmate in a state of undress. Lastly, a review of the facility’s video surveillance found that cameras were not trained to areas where inmates might routinely be in a state of undress. (E) This provision is no longer applicable to compliance findings. (F) This provision is no longer applicable to compliance findings. Reasoning & Findings Statement: This standard places limits cross-gender searches, to include pat-downs, strip searches, and visual body cavity searches. Thus, the ODOC has developed agency-wide policies prohibiting cross-gender pat searches of female inmates, as well as cross-gender strip searches and visual body cavity searches of all inmates in the absence of exigent circumstances. If exigent circumstances arise that require staff to engage in cross-gender strip or visual body cavity searches, policy subsequently requires these searches to be properly documented. It should be noted, however, that during the audit time frame, the John Lilley CC has not engaged in any cross-gender strip or visual body cavity searches. When same-sex strip searches and visual body cavity searches are performed of inmates, the agency further requires staff to ensure professionalism and to utilize the least intrusive manner possible consistent with security needs. Interviews with both random staff and inmates confirmed that staff do not conduct either cross-gender strip searches or cross-gender visual body cavity searches. In excess of this standard, staff receive annual training on inmate search

	procedures, to include utilizing the least intrusive manner when conducting both pat and visual searches. Lastly, this standard limits opposite gender viewing of inmates' breasts, buttocks, and genitalia. During onsite observations of the facility, all areas of the facility had modesty barriers to inhibit opposite gender viewing of inmates in areas where it is expected that they may be in a state of undress. An extensive review of live video surveillance demonstrates that cameras are not trained in areas where inmates would routinely be in a state of undress. Throughout the facility, notices are clearly posted to advise all inmates that individuals of the opposite gender are routinely present within the facility, to include within inmate housing areas. These notices are posted in multiple languages. Lastly, to ensure all inmates are given the utmost in modesty protection, the agency requires opposite gender staff to announce their presence upon entering housing areas where inmates may be in a state of undress. Opposite-gender staff confirmed their routine use of said announcements. As well, most inmates interviewed stated that opposite gender staff do routinely make their presence known when entering any area where inmates may be in a state of undress. Given the clear dedication this facility has demonstrated toward ensuring professionalism and modesty allowances to all inmates, the John Lilley CC has exceeded the requirements of this standard.

115.16	**Inmates with disabilities and inmates who are limited English proficient**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC Interpreter List, 2024 · ODOC Disability Law Center Memo, 6-9-24 · ODOC Inmate Orientation Handbook, English · ODOC Inmate Orientation Handbook, Spanish · ODOC PREA Zero Tolerance Acknowledgements for Inmates, English · ODOC PREA Zero Tolerance Acknowledgements for Inmates, Spanish · ODOC PREA Poster: Arabic, Hmong · ODRC Sexual Abuse Advocacy Brochure: Chinese, Laotian

	· ODRC Sexual Abuse Advocacy Poster: French, Marshallese, Thai, Vietnamese · ODRC PREA Brochure: Spanish · ODRC Reporting Poster: Samoan · ODRC Instructions to Call PREA Hotline: German, Romanian · ODRC Privacy Notice, Female Facilities: Japanese · ODRC Privacy Notice, Male Facilities: Korean · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Zero Tolerance Acknowledgements for Inmates: 3-7-23, 11-16-23, 2-21-24, 5-21-24, 7-31-24, 9-11-24a, 9-11-24b, 9-11-24c, 11-13-24, 1-15-25a, 1-15-25b, 1-29-25, 6-11-25, 6-12-25, 7-11-25, 8-26-25, 9-3-25a, 9-3-25b, 9-10-25, 9-18-25a, 9-18-25b, 10-29-25a, 10-29-25b, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 1-14-26a, 1-14-26b, 1-14-26c, 1-14-26d, 1-21-26, 2-4-26a, 2-4-26b, 2-4-26c, 2-11-26a, 2-11-26b, 2-13-26, 2-18-26, 3-2-26, 3-6-26a, 3-6-26b, 3-6-26c, 3-11-26, 3-23-26, 3-25-26a, 3-25-26b, 3-26-26, 3-27-26, 4-1-26, 4-2-26, 4-3-26, 4-7-26a, 4-7-26b, 4-8-26a, 4-8-26b, 4-8-26c, 4-9-26a, 4-9-26b, 4-9-26c, 4-10-26, 4-13-26a, 4-13-26b, 4-13-26c, 4-13-26d, 4-16-26, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Zero Tolerance Acknowledgements for Inmates, Spanish: 8-4-26 Interviews: · Agency Head · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Intermediate or Higher-Level Facility Staff · Random Staff · Inmates with Disabilities

· Inmates with Limited English Proficiency

Site Review Observations:

· Correctional staff assigned to housing areas entered each area within the building to loudly announce information, to include when opposite gender staff entered the housing area.

· PREA Notices, as well as other advisement notices, were posted in languages spoken by

significant portions of the incarcerate person population; namely English and Spanish.

· PREA information is also available in large print.

· PREA Information is available in a multitude of languages.

· Staff translators in multitude of languages are available as needed.

· Staff also have immediate access to language translation via a pocket translator device.

· Observed an inmate demonstration of how to access PREA information on inmate tablets. This information is available in English and Spanish, as well as close captioning and ASL.

Standard Subsections:

(A) The JLCC has developed agency-wide policies (030601) to enhance PREA communication efforts with disabled inmates; such as those with hearing, vision, speech, or other physical disabilities; psychiatric or other intellectual disabilities, or those with limited English proficiency; so as to provide said inmates with 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. Policy (030601) requires that "every inmate will receive a written copy of the agency's orientation material in formats or through methods to ensure effective communication. Inmates whose primary language is not English will normally be provided a copy or translation of the orientation material in their own language. If literacy problems, intellectual disabilities/disabilities (visual/hearing impairments) exist, the inmate will be assisted in understanding the material." PREA educational information is provided in a multitude of languages, as well as verbally and in video format (available in English and Spanish). The video format includes both a deaf interpreter and closed caption. The JLCC maintains a ODOC staff translator list and interpretation services to assist

	inmates who do not speak a language common to JLCC staff. In this, other agency staff can be used to translate PREA, as well other confidential information. (B) The agency has taken reasonable steps to ensure meaningful access to all aspects of the agency's effort to prevent, detect, and respond to sexual abuse and sexual harassment of inmates who have limited English proficiency, to include access to qualified interpreters for effective translations. The PREA informational brochure is printed in a multitude of languages. As well, per the PREA Coordinator, the PREA Informational video can be seen by inmates in English and Spanish, along with being illustrated via closed captioning and by a deaf interpreter. As needed, staff translators can be used to translate PREA information into other languages. During intake, risk screening, and investigator interviews, employees were aware of the need to obtain staff interpreters for sensitive security matters, such as PREA related investigations. All staff were aware that other inmates could not be used to translate for any inmate during a sexual abuse or sexual harassment investigation or incident. During the audit time frame, there have not been any (0) instances of JLCC using inmate interpreters for PREA related matters. Inmates with physical and/or intellectual disabilities were interviewed. These persons all stated that their disabilities did not prevent them from participating in any facility-based services or that JLCC has made accommodations for their disabilities, to include making accommodations for the agency's responsibility in preventing, detecting, and responding to instances of sexual abuse and sexual harassment. (C) The agency does not rely on inmates to interpreter, read, or otherwise provide assistance to other inmates in response to allegations of sexual abuse or sexual harassment. Rather, the JLCC has developed agency-wide policy (030601) that prohibits the use of inmate interpreters or other types of inmate-based assistance in the transmission or subsequent investigation of security sensitive information, such as PREA related matters. "All inmate education shall be provided to inmates by staff. No inmate interpreters will be utilized except in exigent circumstances. However, approved community of facility volunteers may be utilized" (030601). JLCC staff are aware of these agency policies and do not utilize inmate interpreters for security sensitive matters. Rather, in excess of the PREA standards, the JLCC has negotiated a MOU with a civil rights law firm to provide disability services, via its legal services to prisoners program, to assist those inmates in need of additional accommodations. Reasoning & Findings Statement: This standard empowers all inmates with the ability to redress government in light of claims of sexual abuse and sexual harassment. An essential component to that requirement is the ability to access PREA information, services, and support services. Inmates with disabilities; either cognitive, physical, or cultural, may require additional

	assistance in achieving said access. Hence, it is necessary for the agency to provide additional measures to ensure said inmates have equal access. The JLCC recognizes this need and has created policies to address it. The JLCC maintains sufficient stocks of Inmate Orientation Handbooks, which contain PREA informational papers, in both English and Spanish. The JLCC routinely shows the PREA informational video in English, as well as Spanish, the most spoken language inside of JLCC other than English. The PREA informational video, as well as other PREA resources, are also continuously available to inmates, via their tablets, in both English and Spanish. To help accommodate inmates with other disabilities, the PREA video contains closed captioning and American Sign Language (ASL) interpretation. Lastly, it should be noted that at no time within the audit time frame, has JLCC used inmate interpreters to help agency staff communicate with other inmates regarding security sensitive information. Rather, when needed, staff commonly use staff interpreters or a language assistance phone line for communication with inmates who have limited English proficiency. As well, American Sign Language interpretations can be used for those inmates with hearing impairments. Finally, in significant excess of the standards, the JLCC has negotiated a MOU with a civil rights law firm to provide disability services, via its legal services to prisoners program, to assist those inmates in need of additional accommodations. Accordingly, the agency, and by extension, the JLCC, has exceeded in the requirements of this standard.

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-110235, Hiring and Promotional Procedures, 7-2-24 · ODOC, OP-110210, Background Investigations and Post Conditional Offer of Employment Testing, 6-23-21 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC NICI 5 Year Record Check, 2026 · JLCC Criminal Records Check, 5-27-27 Interviews:

· Administrative (Human Resources) Staff

· Agency PREA Coordinator

· JLCC Warden

· JLCC PREA Compliance Manager

Site Review Observations:

· Review of additional employee/contractor files onsite for required PREA/criminal background documentation.

Standard Subsections:

(A) The JLCC has developed an agency-wide policy (110235) that prohibits the hiring or promotion of employees and contracted workers who have engaged in sexual abuse, been convicted of engaging or attempting to engage in a sexual activity with inmates, or have been civilly or administratively adjudicated to have engaged in a sexual activity with inmates while in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The agency also has policies (110235, 030601) that stipulate prior to all hiring and promotional decisions of employees and contract workers, any incidents of sexual harassment will be considered. Prior to hiring any new employee or contract worker at the facility level, JLCC Human Resource staff ensure that criminal background checks have been conducted on the prospective employee. As well, as required by policy, and confirmed via interview with JLCC Human Resource staff, prior to employment, agency staff ensure that all previous institutions of employment are contacted to determine if candidates have any previously substantiated claims of sexual abuse or resigned during a pending investigation of such claims. Conversely, policy also requires that the JLCC cooperates with other correctional and law enforcement agencies to ensure that accurate information regarding PREA related employment laws are effectively shared between agencies.

(B) ODOC policy (110235)requires that “the appointing authority will consider any incidents of sexual harassment in determining whether to hire or promote any applicant/employee.” Likewise, in speaking with the JLCC Human Resource representative, agency policy requires Human Resource staff to also verify contractor employment history.

(C) Before hiring or promoting employees, policy (110210) requires the agency to perform criminal background checks. Policy (110210) also requires the agency to conduct checks with prior employers for any applicant previously employed by a correctional facility. Within the audit time frame, JLCC has hired twenty-four (24) persons who may have contract with inmates. Per JLCC Human Resource staff, all such persons received a criminal records background check prior to starting their employment.

(D) Agency policy (110210) requires that prior to enlisting the services of any contractors who may have contact with inmates, the agency performs criminal background records checks on said contractors. Per the JLCC Human Resource staff, said background checks are performed prior to the start of contractor service. Specifically, with all three (3) contracts for services engaged within the past twelve (12) months, the JLCC has received an initial background check, as well as, where applicable, required subsequent checks within the required time frame.

(E) Once employed, agency policy (110210) requires that criminal background checks are conducted every five years to ensure that said persons have not been found to have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. In excess of the standards, the ODOC ensures that the fingerprints of all employees are submitted to the Oklahoma Statue Bureau of Investigation, which utilizes a continuous monitoring program to receive subsequent notifications when any employee has negative contact with law enforcement officials and is arrested for any reason, to include sexual abuse or sexual harassment. This notification process occurs as an automated function of arrest. As well, employees have an affirmative duty to report any contact they may have had with other law enforcement agencies and to report any sexual misconduct they may have been found guilty of at any other institution (110210). Furthermore, employees are made aware that failing to provide this information, or providing false information regarding sexual misconduct, is grounds for employee discipline, to include termination of employment (110210). A review of JLCC’s current employee background spreadsheet reflects that all persons working at the JLCC have received their initial criminal background check, as well as, where applicable, required subsequent checks within the required time frame. Within the audit time frame, the JLCC has engaged three (3) contracts for services where criminal background record checks were also conducted on all staff covered in the contract who might have contact with inmates:

(F) As required by policy (110210), all applicants, as well as current employees, who may have contact with inmates are directly asked to disclose any previous sexual misconduct that may have occurred in a prison, jail, lockup, community confinement

	facility, juvenile facility, or other institution. Additionally, the ODOC does impose a continuing affirmative duty on all employees to disclose any misconduct found within Section A of this standard (110210). Review of documentation specific to JLCC confirms the facility's adherence to said policies. (G) Agency policy (110210) expressly advises employees that material omissions or providing false information regarding the aforementioned misconduct is grounds for termination. Agency policy (110235) also advises employees that "pursuant to 21 O.S. § 358.B, it is unlawful for any person applying for employment with the State of Oklahoma to make a materially false, fictitious or fraudulent statement or representation on an employment application, knowing such statement or representation to be materially false, fictitious or fraudulent. Any person found guilty of violating this title will be guilty of a misdemeanor punishable by a fine not exceeding $1,000.00, or by imprisonment in the county jail for a term not exceeding one year, or by both such fine and imprisonment." Facility adherence to said policy was confirmed by JLCC Human Resource staff. (H) Agency policy (110210) allows that unless prohibited by law, the JLCC shall 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. Facility adherence to said policy was confirmed by JLCC Human Resource staff. Reasoning & Findings Statement: This standard requires the agency to consider the sexual safety of inmates in all hiring and promotion decisions within the agency. The agency has numerous policies in place to ensure that end. As well, the JLCC Human Resource Department has developed standardized tracking methods to ensure timely reviews, and subsequent reviews, of applicants and continuing employees\contractors are conducted as required. Review of employee and contractor training files reflect that the JLCC Human Resource Department complies with agency policy. In excess of the standards, the ODOC ensures that the fingerprints of all employees are submitted to the Oklahoma Statue Bureau of Investigation, which utilizes a continuous monitoring program to receive subsequent notifications when any employee has negative contact with law enforcement officials and is arrested for any reason, to include sexual abuse or sexual harassment. This notification process occurs as an automated function of arrest. Employees also have an affirmative duty to report any contact they may have had with other law enforcement agencies and to report any sexual misconduct they may have been found guilty of at any other institution. As such, the JLCC clearly exceeds the requirements of this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040601, Body Worn Camera, 2-18-25 · ODRC Picture of Body Worn Camera Required for All Uniform Staff · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Staffing Plan, 2-17-26 Interviews: · Agency Head · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager Site Review Observations: · Observed video monitoring technologies present within the facility. · Reviewed live video surveillance across the facility. Standard Subsections: (A) Per the JLCC Administrator, the JLCC has not acquired a new facility, made a substantial expansion, or modification to the existing facility since the last PREA audit. However, per the facility warden, prior to any modifications, the agency would consider the effect of that modification upon the facility’s ability to protect inmates

	from sexual abuse. (B) The JLCC has updated the video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. Specifically, in excess of the standards, the agency has introduced body worn cameras on correctional staff. Reasoning & Findings Statement: Within the audit time frame, JLCC has not made any substantial modifications to the existing facility. However, per the facility warden, prior to any modifications, the agency would consider the effect of that modification upon the facility's ability to protect inmates from sexual abuse. The JLCC has updated the video monitoring system, electronic surveillance system, and other monitoring technology since the last PREA audit. Currently, the JLCC has numerous cameras that provide sufficient coverage throughout the institution. In excess of the standard, the ODOC now requires correctional staff to engage body worn cameras. As a function of its annual staffing review, the JLCC does consider, among other factors, generally accepted correctional practices and the use of video monitoring technologies. In all staffing decisions, as well as decisions involving the use of video monitoring technology, the JLCC has certainly sought to maximize the facility's ability to protect inmates from sexual abuse. As such, the agency, and by extension the JLCC, has exceeded the requirements of this standard.

115.21	**Evidence protocol and forensic medical examinations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22 · ODOC, OP-140118, Emergency Medical Response, 3-10-22 · DOJ, A National Protocol for Sexual Assault Medical Forensic Examinations, 09/24

· ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum

· ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review

· ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24

· ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23

· ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24

· ODOC Qualified Staff Member for Victim Advocate, nd

· JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25

· JLCC Qualified Staff Member for Victim Advocate, 7-31-26

· JLCC MOU Sac and Fox Nation SANE and Advocacy Services, 2-10-26

Interviews:

- Agency PREA Coordinator
- JLCC Warden
- JLCC PREA Compliance Manager
- Investigative Staff
- Random Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Sac and Fox Nation
- Community-Based Victim Advocacy Staff
- Inmates Who Reported Sexual Abuse

Site Review Observations:

· Observed Medical Department and privacy screens/limitations.

· Observed interview rooms and protocol for confidential interviews.

Standard Subsections:

(A) Agency policies (030601, 040117, 140118) mandate that JLCC investigative staff follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. In speaking with agency investigators, the use of the DOJ's, A National Protocol for Sexual Assault Medical Forensic Examinations was discussed. Documentation review also supports the use of this protocol.

(B) While not currently assigned to the facility, the JLCC does have the possibility of housing youthful offenders. With that in mind, per agency investigators, the facility does utilize a developmentally appropriate youth protocol.; namely, the U.S. Department of Justice's Office on Violence Against Women protocol, A National Protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents, 3rd Edition, as the evidence collection protocol manual. In speaking with agency investigators, the use of this protocol was confirmed.

(C) In accordance with agency protocol, the JLCC does ensure that all inmates are given access to forensic medical examinations without cost (140118). Specifically, policy (140118) states that "treatment service will be provided to the victim without any co-pay and regardless of whether the victim names the abuser or cooperates with any investigation arising from the reported incident." These exams are performed at an outside facility by qualified SAFE/SANE nursing staff. As SAFE/SANE staff are either on duty or on call 24 hours a day, seven days a week, the examination will always be performed by a qualified medical practitioner. The facility utilizes Sac and Fox Nation for forensic exams. Within the audit time frame, the JLCC has not been required to facilitate any (0) such exams.

(D) Policy (030601) allows for the use of advocates as available from the local rape crisis center. The agency does provide victims of sexual assault with victim advocates from Sac and Fox Nation, a local SANE services and rape crisis center. Persons from this center are continuously available for support as needed.

(E) In accordance with policy (030601, 040117, 140118), and as requested by the victim, the rape crisis advocates may remain with the inmate through the forensic medical examination process. Furthermore, policy (030601) allows that, “with the alleged victim’s consent, the case manager and/or the approved rape advocate, may sit in on OIG interviews.” As confirmed by the JLCC PCM, this person may provide emotional support, crisis intervention, information, and referrals.

(F) Agency policy (030601, 040117) allows that the investigation of allegations of sexual abuse and sexual harassment may be conducted by properly trained staff. In conducting these investigations, agency investigators confirm their adherence to this training requirement. Documentation review supports that said investigators have received proper training as required.

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

(H) Only qualified staff members or qualified community-based staff may serve as rape crisis advocates. All such agency staff servicing in that role have been appropriately screened and trained for that purpose. Through a memorandum of understanding with the local rape crisis center, Sac and Fox Nation, as well as through the use of its own trained staff, the agency has ensured that all persons who have contact with JLCC inmates have been appropriately screened and trained, along with having received education concerning sexual assault and forensic examination issues in general.

Reasoning & Findings Statement:

This standard concerns evidence protocol and forensic medical examinations. The ODOC, and by extension the John Lilley CC, has numerous policies in place to ensure proper accountability during evidence collection and the forensic exam process. During the audit time frame, the John Lilley CC has not been required to initiate the evidence protocol and forensic medical examination process. As evidenced during the interview process, facility staff are aware of the policies and procedures required of sexual abuse investigations. John Lilley CC staff have standard practices in place to ensure the proper flow of the evidence collection process. The John Lilley CC also has trained staff who can service as advocacy staff during the forensic evidence collection process if needed. Lastly, a MOU is in force between the John Lilley CC and Sac and Fox Nation, a local SANE services and rape crisis center to ensure that inmates are afforded access to SANE services and local rape crisis center advocates. With these factors in mind, the John Lilley CC has met the requirements of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22 · ODOC, OP-140118, Emergency Medical Response, 3-10-22 · DOJ, A National Protocol for Sexual Assault Medical Forensic Examinations, 09/24 · ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum · ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24 · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23 · ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · ODOC Qualified Staff Member for Victim Advocate, nd · JLCC Qualified Staff Member for Victim Advocate, 7-31-26 · JLCC MOU Sac and Fox Nation SANE and Advocacy Services, 2-10-26 Interviews: • Agency PREA Coordinator • JLCC Warden

- JLCC PREA Compliance Manager
- Investigative Staff
- Random Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Sac and Fox Nation
- Community-Based Victim Advocacy Staff
- Inmates Who Reported Sexual Abuse

Site Review Observations:

· Observed Medical Department and privacy screens/limitations.

· Observed interview rooms and protocol for confidential interviews.

· Reviewed sexual abuse investigations.

· Review of the agency's website.

Standard Subsections:

(A) Policy (030601) requires "an investigation is conducted and documented whenever an allegation of sexual abuse or harassment is reported." Adherence with agency policy was confirmed by the facility investigator. Within the audit time frame, the JLCC has received one (1) allegation of sexual abuse and sexual harassment. Documentation review confirms that investigations are conducted for each allegation received.

(B) The JLCC refers all allegations of sexual abuse and sexual harassment to the Office of the Inspector General (OIG). As noted by policy (040117), "Oklahoma State Statute, Title 57, Prisons and Reformatories, Section 508.4 creates an Investigation unit with the Oklahoma Department of Corrections (ODOC), with established jurisdiction to investigate criminal wrongdoing and administrative violations at ODOC owned or operated facilities, private prison facility or any other facility who contracts with ODOC house offenders for the State of Oklahoma." As confirmed by the agency investigator, allegations of sexual abuse or sexual harassment are referred for

	investigation by the Office of the Inspector General, unless the allegation does not involve potentially criminal behavior. The ODOC has published this policy on the agency website. Documentation review confirms that all referrals to the ODOC are documented by the agency. (C) In accordance with policy (040117), the Office of the Inspector General is an investigative unit within the Oklahoma Department of Corrections. As confirmed by the agency investigator, all criminal investigations are conducted by the Office of Inspector General. Documentation review supports this assertion. (D) The auditor is not required to audit this provision. (E) The auditor is not required to audit this provision. Reasoning & Findings Statement: This standard requires the proper investigation of all allegations of sexual abuse and sexual harassment. Furthermore, allegations of a criminal nature are required to be referred to the Office of Inspector General (OIG), an internal law enforcement agency with legal authority to conduct criminal investigations. All such referrals are documented. The ODOC policy detailing the investigative and referral process, as well as each component's responsibility within that policy, is publicly available for review on the agency website. Within the audit time frame, the John Lilley CC has referred all criminal allegations of sexual abuse to the Office of Inspector General. In reviewing investigative documentation, as well as interviewing John Lilley CC and agency investigative staff, it is clear that the John Lilley CC has maintained compliance with all requirements of the investigative process and OIG referrals. As such, the John Lilley CC has met the requirements of this standard for the relevant review period.

115.31	**Employee training**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents:

	· ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, Attachment A, 12-1-12 · ODOC, PREA for New Employees PowerPoint Slides, 2022 · ODOC PREA Poster for Employees, English · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Employee Search and Seizure Training: 2025, 2026 · JLCC Cell, Area, Pat Searches Class Rosters: 3-2-26, 3-24-26, 5-11-26, 5-18,26, 6-16-26, 6-18-26, 7-7-26, 7-9-26, 7-21-26, 7-27-26, 7-29-26 Interviews: · JLCC Warden · JLCC PREA Compliance Manager • Administrative (Human Resources) Staff • Medical Staff • Mental Health Staff • Random Staff Site Review Observations: • Random review of employee files, as well as matched review of employee files

	to employees interviewed, to confirm documentation of required PREA training. Standard Subsections: (A) The JLCC currently has one hundred and fourteen (114) employees assigned to the facility. Policy (030601) requires all employees to be fully trained on the agency's zero-tolerance policy for sexual abuse and sexual harassment. As verified by Human Resource staff, such training is initially performed as a function of the hiring process. This PREA for New Employees training is a comprehensive analysis of federal and state laws, as well as the and PREA standards. A review of training curriculum for this class reflects the agency's zero-tolerance policy for sexual abuse and sexual harassment, and discussion on how employees may fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. Employees are also informed that inmates have a right to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting said abuse and harassment, the dynamics of sexual abuse/harassment, reactions to sexual abuse/harassment, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to comply with relevant mandatory reporting laws specific to reporting abuse to outside authorities, and how to communicate effectively and professionally with inmates; including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. During random staff interviews, all employees confirmed receipt of said training. A random review of employee files also confirmed receipt of said training for all employee files reviewed. (B) Training curriculum reviews demonstrate that the material is appropriate for the gender of inmates at the employees' facility. As well, agency policy (030601) requires that "If an employee changes work locations, the newly assigned facility/unit shall ensure that additional training is provided for such staff that may have transferred from a male facility to a female facility or from a female facility to a male facility." As noted by Human Resource staff, during the audit time frame, the JLCC has not had any (0) employees reassigned from facilities housing opposite gender inmates. (C) A review of JLCC PREA Training reflects that all actively employed staff have received their initial PREA training, as well as continued training as appropriate based on agency policy (030601). Following this initial training, subsequent refresher trainings are provided to staff at mandatory time intervals; specifically, their annual In-Service Training. A review of the JLCC PREA Training reflects all continuing training schedules have been maintained.

	(D) All PREA training documents acknowledging an employee's understanding of the information received require an employee signature. Reasoning & Findings Statement: This standard captures the absolute need for all ODOC employees to fully comprehend the agency's zero-tolerance policy regarding sexual abuse and sexual harassment of inmates. Accordingly, the training curriculum for this subject matter, as listed in subsection (a) of this standard, is exceptionally detailed. The training provided to staff of the John Lilley CC is tailored to the gender of inmate assigned to the facility. If staff are transferred to the John Lilley CC from a facility that does not house the same gender of inmates, said staff are provided gender specific training as a function of the facility's orientation program. In excess of this standard, all staff assigned to the John Lilley CC receive complete training on agency protocol regarding the PREA standards, as well as agency sexual abuse and sexual harassment policies, on an annual basis. This training is then documented via an employee signature of staff having completed the course. The John Lilley CC maintains an overall master list of all staff having completed said training. During staff interviews, all employees affirmed their having received significant amounts of training as related to the PREA standards. When asked the series of questions noted within Subsection A of this standard, all staff knew and understood their responsibilities within the agency's zero-tolerance policy. With all this in mind, the ODOC, and by extension, the John Lilley CC, have clearly exceeded the requirements of this standard.

115.32	**Volunteer and contractor training**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC PREA Training for Oklahoma Department of Corrections Contractors PowerPoint Slides, 08/2013 · ODOC PREA Poster for Employees, English · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Documentation of Annual Volunteer Training: 10-7-25, 10-8-25,

	10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 Interviews: · JLCC Warden · JLCC PREA Compliance Manager • Administrative (Human Resources) Staff • Medical Staff • Mental Health Staff • Contractors Who May Have Contact with Inmates • Volunteers Who May Have Contact with Inmates Site Review Observations: • Review of volunteer and contractor PREA training curriculum.

	Standard Subsections: (A) Policy (030601) requires that “volunteers who have inmate contact will receive PREA training as part of (their) initial orientation and then every other year thereafter.” As well, “contract staff whose primary duties include teaching, training or supervising inmates, shall receive training on the agency’s zero tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents.” That said, however, per the PREA Coordinator, it was noted that contractor staff receive annual PREA training similar to correctional employees. At the time of the audit, the JLCC had five hundred and twenty-two (522) volunteers and contract workers present within the facility during the audit time frame who could have had contact with inmates. As affirmed by the JLCC PREA Compliance Manager, 100% of those persons have received appropriate PREA training, dependent on their level of contact with inmates, prior to their entrance into the facility. Volunteer and contractor files were randomly reviewed onsite for receipt of required training documentation. Additionally, when interviewed, both contractors and volunteers confirmed their initial receipt of PREA training, as well as subsequent annual trainings as required. (B) As affirmed by the JLCC PREA Compliance Manager, all volunteers and contract workers have received PREA training appropriate for their role on the facility. When interviewed, both volunteers and contract workers all stated that they had been made aware of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment. They further stated that if the need arose, they could report an incident of sexual abuse or sexual harassment to their supervisor or a security staff member. Volunteer and contractor files were randomly reviewed onsite for receipt of required training documentation. (C) Volunteers and contractors are required to receive PREA training prior to working/ volunteering within the facility. After receipt of training, contractors and volunteers sign an acknowledgement form indicating the date of the training and that they understood the training that they had received. The facility then maintains a copy of all training files belonging to both volunteers and contractors. When asked, volunteers and contract workers all confirmed that they had received PREA training prior to their actual start date with the agency. Volunteer and contractor files were randomly reviewed onsite for receipt of required training documentation. Reasoning & Findings Statement: The agency requires all volunteers and contractors to receive formal training on the agency’s zero-tolerance policy for sexual abuse and sexual harassment. In this,

	volunteers and contractors must be provided sufficient notice of the agency's zero-tolerance policy of sexual abuse and sexual harassment. As well, said persons must be informed of how to report any knowledge they may have regarding such abuse. Lastly, the standard requires that the agency maintain appropriate training records to verify that volunteers and contractors understood the training that they had received. In excess of the PREA Standards, agency policy requires that all volunteers receive PREA refresher training every other year and contractors receive PREA refresher training annually. As with employee training, the JLCC has ensured both volunteers and contractors conducting business on the facility have received initial and subsequent PREA trainings, as well as maintained documentation of those trainings in accordance to the agency's training schedules. In speaking with volunteer and contracted personnel, all persons stated that they have received both initial and subsequent annual PREA training. They further noted their understanding of the nature of the PREA, along with their own roles within it. Lastly, all contractors and volunteers interviewed were also able to articulate their responsibilities within the zero-tolerance policy specific to reporting acts of sexual abuse and sexual harassment. As such, JLCC has exceeded the requirements of this standard.

115.33	**Inmate education**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC Inmate Orientation Handbook, English · ODOC Inmate Orientation Handbook, Spanish · ODOC PREA Zero Tolerance Acknowledgements for Inmates, English, 12/21 · ODOC PREA Zero Tolerance Acknowledgements for Inmates, Spanish, 12/21 · ODOC PREA Poster: Arabic, Hmong · ODRC Sexual Abuse Advocacy Brochure: Chinese, Laotian · ODRC Sexual Abuse Advocacy Poster: French, Marshallese, Thai, Vietnamese · ODRC PREA Brochure: Spanish · ODRC Reporting Poster: Samoan · ODRC Instructions to Call PREA Hotline: German, Romanian

	· ODRC Privacy Notice, Female Facilities: Japanese · ODRC Privacy Notice, Male Facilities: Korean · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Inmate Orientation Handbook, English · JLCC Advocacy and Reporting Brochure, English · JLCC Initial Orientation Verification Form: 2-28-23, 10-17-23a, 10-17-23b, 10-17-23c, 2-21-24, 5-17-24, 9-5-24, 9-11-24, 11-13-24, 1-15-25a, 1-15-25b, 1-24-25, 6-10-25, 6-11-25, 6-18-25, 7-23-25, 8-20-25, 8-26-25, 9-3-25, 9-9-25, 9-10-25, 9-18-25, 10-24-25, 10-29-25, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-1-26, 4-7-26, 4-8-26a, 4-8-26b, 4-8-26c, 4-17-26, 4-28-26a, 4-28-26b, 5-19-26 · JLCC Zero Tolerance Acknowledgements for Inmates: 3-7-23, 11-16-23, 2-21-24, 5-21-24, 7-31-24, 9-11-24a, 9-11-24b, 9-11-24c, 11-13-24, 1-15-25a, 1-15-25b, 1-29-25, 6-11-25, 6-12-25, 7-11-25, 8-26-25, 9-3-25a, 9-3-25b, 9-10-25, 9-18-25a, 9-18-25b, 10-29-25a, 10-29-25b, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 1-14-26a, 1-14-26b, 1-14-26c, 1-14-26d, 1-21-26, 2-4-26a, 2-4-26b, 2-4-26c, 2-11-26a, 2-11-26b, 2-13-26, 2-18-26, 3-2-26, 3-6-26a, 3-6-26b, 3-6-26c, 3-11-26, 3-23-26, 3-25-26a, 3-25-26b, 3-26-26, 3-27-26, 4-1-26, 4-2-26, 4-3-26, 4-7-26a, 4-7-26b, 4-8-26a, 4-8-26b, 4-8-26c, 4-9-26a, 4-9-26b, 4-9-26c, 4-10-26, 4-13-26a, 4-13-26b, 4-13-26c, 4-13-26d, 4-16-26, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Zero Tolerance Acknowledgements for Inmates, Spanish: 8-4-26 Interviews: · Agency PREA Coordinator · JLCC PREA Compliance Manager · Intake Staff

	· Staff Who Perform Screening for Risk of Victimization and Abusiveness · Random Inmates Site Review Observations: · Observed the inmate reception area. · Observed PREA informational postings in inmate Housing, Education, Library, Law Library, and other areas of high traffic. · Observed a variety of PREA related materials and information available for inmate use within the facility libraries. · Observed Inmate PREA training video. · Observed inmate demonstrating retrieval and use of PREA information on inmate's tablet. · Reviewed inmate files for documentation of PREA training. Standard Subsections: (a) Policy (030601) requires that upon receipt into the facility, "every inmate will receive a written copy of the agency's orientation material in formats or through methods to ensure effective communication. Inmates whose primary language is not English will normally be provided a copy or translation of the orientation material in their own language." Inmates will also be informed of reporting mechanisms to expose incidents or suspicions of sexual abuse and harassment. Inmates will be made aware of their right to be free from retaliation for reporting incidents of sexual abuse and sexual harassment. Within the audit time frame, the JLCC has received 465 inmates during the Intake process. Per the PREA Compliance Manager, 100% of those inmates were provided initial PREA information. (b) Per agency policy (030601), "within 30 days of intake, the facility where the inmate is housed shall provide… comprehensive education to inmates either in person or through video." As noted by Intake staff, inmates are immediately provided with this PREA information upon their arrival to the facility. In excess of the standards, every inmate transferring into JLCC, regardless of how long the inmate has been incarcerated the ODOC or at another transfer facility, will participate in facility orientation, including a comprehensive component on sexual abuse and sexual

	harassment prevention and response training. This comprehensive training detailing the key points of the PREA process is provided within seven (7) days of intake. Within the audit time frame, the JLCC received 465 inmates, whose length of stay was for 30 days or more. Of those, per the JLCC PCM, 100% were provided with a comprehensive explanation of the PREA process through their facility orientation program. (c) Per the PREA Coordinator, all inmates assigned to the ODOC have received training specific to the agency's Zero Tolerance policy. As well, per agency policy (030601), "upon transfer to a different facility, the inmate will receive orientation in regard to PREA policies and procedures which may differ from a previous facility." In accordance with policy (030601), and as confirmed by Intake Staff, upon their receipt into JLCC, inmates are provided with a brief PREA overview. Within seven (7) days of Intake, inmates are then provided with a more comprehensive facility orientation, to include PREA training. Documentation review confirms receipt of all required inmate training. (d) Agency policy (030601) dictates that "every inmate will receive a written copy of the agency's orientation material in formats or through methods to ensure effective communication. Inmates whose primary language is not English will normally be provided a copy or translation of the orientation material in their own language. If literacy problems, intellectual disabilities/disabilities (visual/hearing impairments) exist, the inmate will be assisted in understanding the material." As noted by the agency PREA Coordinator, accommodations are provided to inmates as necessary to help with their understanding and subsequent ability to utilize the PREA reporting processes. In speaking with Intake staff, accommodation strategies were discussed for inmates with limited English proficiency, deaf, visually impaired, those with limited reading skills, as well as those inmates who are otherwise disabled. All PREA information is provided in several alternative formats to ensure inmates with disabilities, to include those with limited English proficiency, have equal opportunity to receive, understand, and utilize the PREA process as necessary to promote the sexual safety of all inmates assigned to the ODOC, and more specifically, the John Lilley CC. PREA brochures and informational posters are provided in a multitude of languages. The PREA Inmate Education Video is available in two languages: English and Spanish. These videos contain a deaf interpreter, as well as closed captioning in the appropriate spoken language of the video. PREA informational posters are available in large print for the visually impaired. Translation services are available for inmates who don't speak English. As well, in excess of standard requirements, the JLCC has negotiated a MOU with a civil rights law firm to provide disability services, via its legal services to prisoners program, to assist those inmates in need of additional accommodations. As noted by the PREA Coordinator, the agency will provide reasonable accommodations to all inmates in need of ADA assistance, both physical and cognitive, to ensure said inmates have equal opportunity to benefit from the agency's zero-tolerance stance against sexual abuse and sexual harassment.

(e) In accordance with policy (030601), and as confirmed by Intake Staff, all inmate education is documented on the Initial Orientation Verification Form, which is then acknowledged by signature by both the inmate receiving training and the staff member providing it. The agency maintains this documentation to reflect that all inmates have been made aware of their rights under the PREA program. During inmate interviews, only one (1) of the 32 interviewed inmates stated that they had not received, or did not remember receiving, PREA training. Files were reviewed for all inmates interviewed. At that time, it was noted that all (32) inmates had, in fact, received PREA training, as well as signed documentation acknowledging this training.

(f) Per policy (030601), “the facility/unit head shall designate staff to monitor inmate access to handbooks and ensure information regarding sexual abuse and harassment is continuously and readily available or visible to inmates through posters or other written formats.” Accordingly, in addition to receiving sexual abuse and sexual harassment information during facility intake and orientation, inmates assigned to the JLCC also have key information from the agency/facility PREA program continuously available to them via posters, handbooks, tablets, and other written formats. Specifically, as confirmed by Intake staff, all inmates are provided personal copies of the ODOC Inmate Orientation Handbook (available in English and Spanish) upon receipt into the ODOC system, they are also given a unit specific orientation handbook at Intake of their assigned institution. This material, as well as a wealth of other PREA related information, is continuously available within the facility’s Law Library. It is also continuously available via each inmate’s tablet. Throughout the facility, as well as posted near all inmate phones, PREA informational posters are displayed in both English and Spanish. These are posters give both a PREA reporting hotline number, as well as the name and contact information for a local Rape Crisis Center that provides sexual abuse recovery support services to all requesting inmates.

Reasoning & Findings Statement:

This standard requires that all persons incarcerated within the ORDC are provided a comprehensive education specific to the agency’s zero-tolerance policy against sexual abuse and sexual harassment. This information must be provided in a manner that each inmate can understand, to include accommodations for limited English proficiency, as well as physical or cognitive disabilities. In that, the John Lilley CC has demonstrated its compliance with agency policy by ensuring all incarcerated individuals received into the facility are provided an initial overview of this information immediately upon facility intake. The John Lilley CC has also exceeded standard requirements by ensuring all inmates are given a comprehensive orientation of the agency’s PREA program within seven (7) days of facility intake. This ensures

	that all inmates within the John Lilley CC are cognizant of the agency's zero-tolerance policy toward sexual abuse and sexual harassment, as well as have subsequent access to, and can effectively utilize, the PREA reporting mechanism. In speaking with inmates assigned to the John Lilley CC, all inmates stated that they were aware of PREA and its purpose within the facility. While inmates were collectively aware of the policy and their rights to varying degrees, all inmates interviewed were specifically aware of at least one, but generally more, methods by which they could report allegations of sexual abuse or sexual harassment. Accordingly, the John Lilley CC has exceeded the requirements of this standard.

115.34	**Specialized training: Investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · ODOC, OP-040117, Investigations, 9-12-22 · ODOC OP-100202, Standards for Basic Peace Officer Training, 4-1-25 · ODOC, OP-140118, Emergency Medical Response, 3-10-22 · ODOC, OP-140125, Bloodborne Pathogen, 7-13-22 · ODOC, PREA for New Employees PowerPoint Slides, 2022 · ODOC PREA Poster for Employees, English · ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum · ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24, 4-9-25 · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23

	· ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24 · DOJ, A National Protocol for Sexual Assault Medical Forensic Examinations, 09/24 · JLCC PREA Staff Training Acknowledgement: 3-12-24, 5-7-24, 5-20-24, 5-29-24, 7-30-24, 8-16-24, 9-9-24, 9-25-24, 1-12-25, 1-24-25, 1-27-25, 3-25-25, 4-8-25a, 4-8-25b, 4-22-25, 4-25-25, 5-6-25, 7-15-25a, 7-15-25b, 7-15-25c, 7-15-25d, 7-29-25a, 7-29-25b, 7-29-25c, 7-29-25d, 7-29-25e, 7-30-25a, 7-30-25b, 8-6-25, 8-11-25, 8-26-25a, 8-26-25b, 8-29-25, 9-10-25, 10-2-25, 10-6-25a, 10-6-25b, 10-6-25c, 10-16-25a, 10-16-25b, 10-16-25c, 10-16-25d, 10-29-25a, 10-29-25b, 11-20-25, 12-9-25, 12-10-25, 12-11-25a, 12-11-25b, 12-11-25c, 12-11-25d, 12-11-25e, 12-11-25f, 12-29-25, 2-18-26, 2-23-26, 3-23-26, 3-26-26, 4-22-26, 5-11-26, 6-4-26, 6-12-26 Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Administrative (Human Resources) Staff · JLCC Investigative Staff Site Review Observations: · Observed investigative training certifications. · Reviewed agency training records documenting investigative training curriculums.

Standard Subsections:

(A) Per policy (030601), “specialized training is provided for employees who may respond, as part of their job duties, to reported incidents of sexual assault… Such training shall include conducting sexual abuse investigations in confinement settings.” This training is provided in addition to the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, investigators participate in training which shall include, but not limited to, conducting sexual abuse investigations in confinement settings. In interviewing agency-based investigative staff, said staff confirmed participation in numerous related courses. Additionally, training curriculums and employee training certifications provided additional documentation to support facility compliance.

(B) Per policy (030601), all investigators must receive specialized training in addition to the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, investigators participate in training which shall include, but not limited to, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. In interviewing ODOC investigative staff, said staff confirmed participation in numerous related courses. Additionally, training curriculums and employee training certifications provided additional documentation to support facility compliance.

(C) The agency maintains documentation that agency investigators have completed the required specialized training related to sexual abuse investigations. Specifically, policy (030601) requires that “documentation of training will be retained in the employee personnel file.” A review of training certifications confirms that such documentation is maintained within agency files for all investigators currently utilized within the ODOC, and by extension, within the JLCC.

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

Reasoning & Findings Statement:

The standard requires that all persons employed by the agency who investigate allegations of sexual abuse and sexual harassment have received appropriate training of investigating such within a confinement setting. Agency documentation confirms

	the receipt of such training for all agency investigators who conduct investigations within the John Lilley CC. Specifically, all investigators within the John Lilley CC have received specialized training for interviewing sexual abuse victims, for the proper use of Miranda and Garrity warnings, for sexual abuse evidence collection in confinement settings, and for the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Interviews with agency staff further confirm receipt of this training. As such, John Lilley CC has met the requirements of this standard.

115.35	**Specialized training: Medical and mental health care**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · ODOC, OP-140118, Emergency Medical Response, 3-10-22 · ODOC, OP-140125, Bloodborne Pathogen, 7-13-22 · ODOC PREA Poster for Employees, English · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 Interviews: • Agency PREA Coordinator

- JLCC Warden
- JLCC PREA Compliance Manager
- Administrative (Human Resources) Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Sac and Fox Nation

Site Review Observations:

- Review of facility training records.

Standard Subsections:

(A) Policy (030601) requires that in addition to the generalized training provided to all staff, “mental health and medical 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 the PREA reporting process.” There are fourteen (14) medical and mental health care practitioners who regularly work at the JLCC, with 100% having received training on the agency’s PREA policies. Interviews with JLCC medical and mental health staff confirm that said staff have received training as required. A review of agency training records document staff participation in initial PREA training.

(B) Agency policy (030601) requires that “if medical staff employed by the agency is authorized to conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.” However, as verified through interviews with JLCC medical/mental health staff, medical staff at JLCC do not conduct forensic medical examinations. Rather, as confirmed by the SAFE/SANE MOU, inmates are transported to a nearby public medical facility, when SANE staff from Sac and Fox Nation provide said services.

(C) Agency policy (030601) requires that training “documentation shall be retained in the employee’s file.” Interviews with Medical and Mental Health staff confirm signing documentation to acknowledge their receipt of said training. A review of training records reflects that 100% of the fourteen (14) Medical and Mental Health employees

	assigned to the JLCC have received specialized training appropriate for their professional roles and the agency does maintain documentation to support this fact. (D) As well, inaccordance with their professional role, a review of training records reflects medical and mental health practitioners have also received the generalize PREA training provided to all other persons working within a correctional setting. Reasoning & Findings Statement: This standard requires that all medical and mental health care practitioners are provided both the generalized training on the agency's zero-tolerance against sexual abuse and sexual harassment, as well as specialized training on how to detect and assess signs of sexual abuse and sexual harassment, how to preserved physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, along with how and to whom one should report allegations or suspicions of sexual abuse and sexual harassment. John Lilley CC medical and mental health staff confirm that said staff have received all required and continuing education classes specific to their professional role in assisting victims of sexual abuse and sexual harassment. Also, an MOU with Sac and Fox Nation, the local SANE service provider, confirms that all persons conducting SANE/SAFE exams are properly certified to perform such. Documentation of agency training verifies that medical and mental health staff receive not only the generalized PREA training provided to all staff, but also specialized training specific to their medical and mental health roles within the agency. As such, the John Lilley CC has met the requirements of this standard.

115.41	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-030102, Inmate Housing, 9-23-22 · ODOC, OP-030102, Self Report Form, English, 05/21 · ODOC, OP-030102, Self Report Form, Spanish, 05/21

	· ODOC, OP-060106, Non-Associations and Protective Measures, 3-30-22 · ODOC, OP-140114, Screening New Arrivals, 2-20-24 · ODOC, OP-140147, Determination and Management of Inmates with Gender Dysphoria, 12-21-22 · ODOC Cell Assessment Paper Form, 9/22 · ODOC Cell Assessment Electronic Form · ODOC, Inmates' Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Initial Screening: · 11-7-24, 1-8-25, 1-24-25, 6-11-25a, 6-11-25b, 6-16-25, 6-26-25, 6-27-25, 7-23-25, · 8-21-25, 8-26-25, 9-3-25, 9-4-25, 9-10-25, 9-12-25, 9-26-25, 10-24-25, 10-27-25, · 11-3-25a, 11-3-25b, 11-20-25, 12-2-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-7-26, · 4-9-26a, 4-9-26b, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Subsequent Screening: 10-29-24, 12-2-24, 2-10-25, 2-24-25, 6-18-25, 7-2-25, 7-10-25, 7-15-25, · 7-25-25, 7-30-25, 8-19-25, 8-27-25, 9-3-25, 9-23-25a, 9-23-25b, 9-26-25, 9-29-25, · 9-30-25, 10-10-25, 11-8-25, 11-17-25, 11-21-25, 11-24-25, 12-3-25, 1-5-26, 3-3-26a, · 3-3-26b, 3-23-26, 3-27-26, 4-7-26, 4-22-26, 5-4-26a, 5-4-26b, 5-6-26, 5-7-26, 5-13-26, · 6-3-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Annual Screening: 10-29-24, 7-9-25, 1-16-26, 2-12-26, 5-4-26, 5-27-26, 5-28-26a, 5-28-26b, 5-28-26c, 5-28-26d, 5-28-26e · JLCC Inmate Self Report Form: 2-28-23, 2-16-24, 5-27-24, 7-29-24, 9-5-24, 9-6-24a,

	9-6-24b · JLCC Cell Assessment Form: 9-6-24, 6-16-25, 10-24-25, 11-3-25, 11-20-25, 12-2-25, 1-5-26, 2-11-26, 2-13-26, 4-7-26 · JLCC Inmate Case Note: 3-24-23, 3-14-24, 6-17-24, 8-26-24, 9-25-24a, 9-25-24b, 10-3-24, 10-4-24, 2-10-25, 9-26-25, 10-9-25a, 10-9-25b, 3-27-26, 4-9-26, 4-22-26, 5-20-26 Interviews: • Agency PREA Coordinator • JLCC Warden • JLCC PREA Compliance Manager • Intake Staff • Medical Staff • Mental Health Staff • Staff Who Perform Screening for Risk of Victimization and Abusiveness • Inmates Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex • Inmates Who Reported Sexual Abuse • Limited English Proficient Inmates • Disabled Inmates • Random Inmates Site Review Observations: • Observed PREA screening demonstration. • Observed housing formats and locations.

- Reviewed inmate files.

Standard Subsections:

(A) Policy (030102) requires that “upon arrival to the assigned facility inmates will be screened for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior.” The JLCC Intake staff affirm the facility’s adherence to agency policy. Specifically, all inmates received into the facility are screened for sexual victimization and/or sexually abusive risk factors on the same day that the inmates are received into the facility. Mock Intake and Risk Screening Processes were observed by the auditor. Documentation review supports this screening occurs as required by policy.

(B) Policy (030102) requires that the screenings will be completed “upon arrival to the assigned facility.” In speaking with JLCC Intake staff, the JLCC PREA Compliance Manager, and well as facility inmates, it was noted that said screenings take place immediately upon each inmate’s arrival to the facility. In accordance with agency policy, of the 465 inmates entering the facility within the audit time frame, 100% were subsequently provided risk screening assessments for their risk of being sexually victimized or for being a sexual abuser the same day they entered the facility. Documentation review supports this screening occurs as required by policy.

(C) The PREA screening assessment is conducted using objective screening instruments; namely, the Cell Assessment Form and the Self Report Form. A review of the twenty-one (21) survey questions provided to inmates on the Cell Assessment Form and a review of the nine (9) survey questions on the Self Report Form do not present either an implicit bias or leading statements. Neither the Cell Assessment Form nor the Self Report Form contains value statements, bias language, or implied negative consequences for affirmative answers to any of the questions asked. Rather, they are strictly utilitarian forms that were administered in a nonjudgmental manner during a mock screening demonstration.

(D) Policy (030601) notes that the “risk factors for inmates included in this category are: younger, older, of small stature, first time inmates, mental or physically disabled, serving incarceration for a sexual related offense, prior institutional victimization, LGBTQI orientation, or perceived by other inmates as weak.” The Cell Assessment Form and the Self Report Form do consider, at a minimum, if the inmate has a mental, physical, or developmental disability. It considers the age of the inmate, the inmate’s physical build, whether the inmate has previously been incarcerated, whether the inmate’s criminal history is exclusively nonviolent, whether the inmate has prior

convictions for sex offenses against an adult or child, whether the inmate has previously experienced sexual victimization, the inmates' own perception of vulnerability, and whether the inmate is or is perceived to be gay, lesbian, bisexual, intersex, transgender, intersex, or gender nonconforming. Inmates are explicitly asked if they are gay, lesbian, bisexual, transgender, intersex, or gender nonconforming/gender nonbinary. Inmates are then asked if others perceive them as the same. The risk screener is allowed to enter his/her subjective perception of the inmate's gender expression, as well as any additional information regarding the inmate's sexual safety. It should be noted that the JLCC does not detain inmates solely for immigration purposes. During inmate interviews, only one (1) inmate stated that they had not, in fact, been asked the aforementioned questions upon their receipt into the JLCC. All but two (2) inmates interviewed also affirmed that staff later asked them questions related to their sexual safety. Facility documentation confirms that said inmates did, in fact, receive both an initial and subsequent risk assessment upon receipt into the facility.

(E) In assessing inmates for their risk of being sexually abusive, the Cell Assessment and Self Report Forms do consider prior acts of sexual abuse, prior convictions for violent offenses, and the history of prior institutional violence or sexual abuse. Along with observing a mock screening process, the auditor also reviewed several Cell Assessment and Self Report Forms completed within the auditing time frame. Forms were generally filled out in their entirety, with inmates having generally provided relevant answers to each of the questions asked. It should further be noted that risk assessment staff confirmed that inmates may refuse to answer any question on the survey or may refuse participation in the entire survey without the threat of negative consequences. None of the inmates interviewed suggested that they felt pressured to complete the risk assessment forms or that staff threatened them with discipline if they failed to complete the forms.

(F) Policy (030102) requires that "based upon the inmate's risk for victimization or abusiveness, the inmate will be re-assessed as determined by the facility head, not to exceed 30 days, from the date of the last cell assessment." Within the audit time frame, 100% of the 465 inmates with a length of stay in the facility for 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival to the JLCC. In excess of the standard requirements, the John Lilley CC also performs annual reassessments of all inmates. In speaking with JLCC risk assessment staff, their adherence to this policy was confirmed. All inmates interviewed also affirmed that staff later asked them questions related to their sexual safety. Facility documentation confirms that said inmates did, in fact, receive both an initial and subsequent risk assessment upon receipt into the facility.

(G) Policy (030102) allows that a inmate's risk level will be reassessed "when

warranted due to a referral, request, incident of sexual abuse, or receipt of information related to the inmate risk of sexual victimization or abusiveness." Both the JLCC PREA Compliance Manager and staff who perform screening for risk of victimization and abusiveness confirm reassessments are conducted as required. As well, in discussing reassessment processes with inmates, several inmates stated that they believed if they brought concerns for their safety to the attention of security personnel, they would be subsequently interviewed by either the JLCC PREA Compliance Manager or Unit Management staff regarding these concerns. All of these inmates also believed that JLCC staff would address their needs in a timely manner. When asked, all of the inmates interviewed stated that they felt their sexual safety was not at risk at JLCC.

(H) Policy (030102) expressly prohibits disciplinary sanctions against any inmate who refuses to answer or fails to provide complete and/or accurate answers to any of the questions noted on the Cell Assessment or Self Report forms. When interviewed, Intake, risk assessors, and the JLCC PREA Compliance Manager affirmed that disciplinary sanctions were not imposed against inmates for refusing or failing to answer any of the questions on the PREA Assessment Form. As well, inmate interviews confirmed that said population was aware of their right not to answer related questions. None of the inmates interviewed suggested that they felt pressured to complete the risk assessment forms or that staff threatened them with discipline if they failed to complete the forms.

(I) Policy (030601) requires that "facilities will ensure appropriate control, for dissemination of information collected through the screening process in order to ensure sensitive information is not exploited to the detriment of the inmate by staff or other inmates." Accordingly, all PREA screenings are provided the same level of privacy as any other medical information assessment. Policy further requires, as well as reinforced by the electronic credential requirements necessary to gain access to electronically stored Cell Assessment and Self Report forms, that facility staff must restrict the spread of information obtained as a function of the assessment process to only those designated staff members with an operational need for said information in order to inform classification, housing and work assignments, programmatic and non-programmatic activities, or other relevant institutional activities. JLCC risk assessment and other operative staff associated with the assessment process affirmed the information obtained by way of said documents were considered restricted, and as such, was not distributed to unauthorized staff. Lastly, the auditor observed that completed assessment forms did require authorized credentials to access said documents within the JLCC electronic data base, as well as restricted access for physical copies of any assessment documents.

Reasoning & Findings Statement:

	This standard requires that all inmates are properly screened for their risk of being sexually victimized or sexually abusive. This screening is done to ensure all inmates are provided meaningful protection against such abuse while incarcerated. As a foundation of this protection, the ODOC has developed an objective instruments that are administered and scored at the facility level as a simple fact assessment each time an inmate is received upon the facility, at the initiation and conclusion of investigations into substantiated or unsubstantiated allegations, and when referrals are made due to mental health concerns and/or referrals due to concerns of substantial imminent risk of sexual abuse. The John Lilley CC has demonstrated the use of the risk assessment process as required by policy. All assessments are generally completed within 72 hours of intake, with subsequent assessments generally performed no later than 30 days after intake. In excess of the standard requirements, the John Lilley CC also performs annual reassessments of all inmates. All interviewed staff were knowledgeable of the confidentiality of the risk assessment, as well as an inmate's right to refuse participation in the assessment process. None of the inmates interviewed suggested that they felt pressured to complete the risk assessment forms or that staff threatened them with discipline if they failed to complete the forms. A review of documentation supporting the risk assessment process reflects the facility's overall adherence to agency policy. As such, John Lilley CC has exceeded the requirements of this standard.

115.42	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-030102, Inmate Housing, 9-23-22 · ODOC, OP-030102, Self Report Form, English, 05/21 · ODOC, OP-030102, Self Report Form, Spanish, 05/21 · ODOC, OP-060106, Non-Associations and Protective Measures, 3-30-22 · ODOC, OP-140114, Screening New Arrivals, 2-20-24 · ODOC, OP-140147, Determination and Management of Inmates with Gender Dysphoria,

	12-21-22 · ODOC Cell Assessment Paper Form, 9/22 · ODOC Cell Assessment Electronic Form · ODOC, Inmates' Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Initial Screening: · 11-7-24, 1-8-25, 1-24-25, 6-11-25a, 6-11-25b, 6-16-25, 6-26-25, 6-27-25, 7-23-25, · 8-21-25, 8-26-25, 9-3-25, 9-4-25, 9-10-25, 9-12-25, 9-26-25, 10-24-25, 10-27-25, · 11-3-25a, 11-3-25b, 11-20-25, 12-2-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-7-26, · 4-9-26a, 4-9-26b, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Subsequent Screening: 10-29-24, 12-2-24, 2-10-25, 2-24-25, 6-18-25, 7-2-25, 7-10-25, 7-15-25, · 7-25-25, 7-30-25, 8-19-25, 8-27-25, 9-3-25, 9-23-25a, 9-23-25b, 9-26-25, 9-29-25, · 9-30-25, 10-10-25, 11-8-25, 11-17-25, 11-21-25, 11-24-25, 12-3-25, 1-5-26, 3-3-26a, · 3-3-26b, 3-23-26, 3-27-26, 4-7-26, 4-22-26, 5-4-26a, 5-4-26b, 5-6-26, 5-7-26, 5-13-26, · 6-3-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Annual Screening: 10-29-24, 7-9-25, 1-16-26, 2-12-26, 5-4-26, 5-27-26, 5-28-26a, 5-28-26b, 5-28-26c, 5-28-26d, 5-28-26e · JLCC Inmate Self Report Form: 2-28-23, 2-16-24, 5-27-24, 7-29-24, 9-5-24, 9-6-24a, 9-6-24b · JLCC Cell Assessment Form: 9-6-24, 6-16-25, 10-24-25, 11-3-25, 11-20-25, 12-2-25, 1-5-26, 2-11-26, 2-13-26, 4-7-26

· JLCC Inmate Case Note: 3-24-23, 3-14-24, 6-17-24, 8-26-24, 9-25-24a, 9-25-24b,

10-3-24, 10-4-24, 2-10-25, 9-26-25, 10-9-25a, 10-9-25b, 3-27-26, 4-9-26, 4-22-26,

5-20-26

Interviews:

- Agency PREA Coordinator
- JLCC Warden
- JLCC PREA Compliance Manager
- Intake Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Inmates Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Inmates Who Reported Sexual Abuse
- Limited English Proficient Inmates
- Disabled Inmates
- Random Inmates

Site Review Observations:

- Observed PREA screening demonstration.
- Observed housing formats and locations.
- Reviewed inmate files.

Standard Subsections:

	(A) Policy (030601) requires that the agency use information from the PREA risk screening evaluation to help separate inmates with a high risk of being sexually victimized from those inmates with a high risk of being sexually abusive. As such, the information gleaned from the Cell Assessment Form is used to inform inmate housing, bed, work, education, and program assignments. In speaking with Intake staff, as well as the JLCC PREA Compliance Manager, once an inmate is deemed as a possible high risk for sexual victimization, staff will ensure that the inmate at risk is not housed in a vulnerable location with respect to other inmates who are assessed at a high risk to sexually abuse other inmates. Facility documentation reflects this is an institutionalized process. (B) Policy (030601) requires that "each facility shall make individualized determinations about how to best ensure the safety of each inmate." In speaking with the PREA Coordinator and the JLCC PREA Compliance Manager, staff affirmed that the concerns for every inmate are reviewed on an individual basis. In speaking with inmates currently assigned to the JLCC, all inmates stated that their own opinions regarding their personal safety are considered by JLCC staff when provided housing or job assignments. Inmates further stated that if their concerns for their own safety changed, they believed JLCC staff would take their concerns seriously. As such, there weren't any (0) inmates who expressed any fear or concern for their sexual safety while assigned to JLCC. (C) This provision is no longer applicable to compliance findings. (D) This provision is no longer applicable to compliance findings. (E) This provision is no longer applicable to compliance findings. (F) This provision is no longer applicable to compliance findings. (G) This provision is no longer applicable to compliance findings. Reasoning & Findings Statement: This standard works to ensure the appropriate use of information gained via the risk assessment process for sexual victimization and sexual abusiveness. The ODOC has

	developed policies and protocols to ensure the intelligent use of this information to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. In response, the John Lilley CC has demonstrated consistent adherence to these agency policies. Said policies require John Lilley CC staff to make individualized determinations regarding the sexual safety of all inmates. Inmates deemed to be at a higher risk of sexual victimization are routinely monitored by unit staff and provided numerous avenues to speak with unit administration as needed. Interviews with the agency PREA Coordinator and the John Lilley CC PCM reflect that facility staff have discretion in managing the safety of individual inmates assigned to the John Lilley CC. In managing the safety of inmates, documentation demonstrates that inmates' own views regarding their own safety are given serious consideration specific to facility operations. As such, agency policy meets, and John Lilley CC adheres to, the requirements of this standard.

115.43	**Protective Custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-030102, Inmate Housing, 9-23-22 · ODOC, OP-030102, Self Report Form, English, 05/21 · ODOC, OP-030102, Self Report Form, Spanish, 05/21 · ODOC, OP-060106, Non-Associations and Protective Measures, 3-30-22 · ODOC, OP-140114, Screening New Arrivals, 2-20-24 · ODOC, OP-140147, Determination and Management of Inmates with Gender Dysphoria, 12-21-22 · ODOC Cell Assessment Paper Form, 9/22 · ODOC Cell Assessment Electronic Form · ODOC, Inmates' Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021

	· JLCC Screening for Risk of Sexual Victimization and Abusiveness, Initial Screening: · 11-7-24, 1-8-25, 1-24-25, 6-11-25a, 6-11-25b, 6-16-25, 6-26-25, 6-27-25, 7-23-25, · 8-21-25, 8-26-25, 9-3-25, 9-4-25, 9-10-25, 9-12-25, 9-26-25, 10-24-25, 10-27-25, · 11-3-25a, 11-3-25b, 11-20-25, 12-2-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-7-26, · 4-9-26a, 4-9-26b, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Subsequent Screening: 10-29-24, 12-2-24, 2-10-25, 2-24-25, 6-18-25, 7-2-25, 7-10-25, 7-15-25, · 7-25-25, 7-30-25, 8-19-25, 8-27-25, 9-3-25, 9-23-25a, 9-23-25b, 9-26-25, 9-29-25, · 9-30-25, 10-10-25, 11-8-25, 11-17-25, 11-21-25, 11-24-25, 12-3-25, 1-5-26, 3-3-26a, · 3-3-26b, 3-23-26, 3-27-26, 4-7-26, 4-22-26, 5-4-26a, 5-4-26b, 5-6-26, 5-7-26, 5-13-26, · 6-3-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Annual Screening: 10-29-24, 7-9-25, 1-16-26, 2-12-26, 5-4-26, 5-27-26, 5-28-26a, 5-28-26b, 5-28-26c, 5-28-26d, 5-28-26e · JLCC Inmate Self Report Form: 2-28-23, 2-16-24, 5-27-24, 7-29-24, 9-5-24, 9-6-24a, 9-6-24b · JLCC Cell Assessment Form: 9-6-24, 6-16-25, 10-24-25, 11-3-25, 11-20-25, 12-2-25, 1-5-26, 2-11-26, 2-13-26, 4-7-26 · JLCC Inmate Case Note: 3-24-23, 3-14-24, 6-17-24, 8-26-24, 9-25-24a, 9-25-24b, 10-3-24, 10-4-24, 2-10-25, 9-26-25, 10-9-25a, 10-9-25b, 3-27-26, 4-9-26, 4-22-26, 5-20-26

Interviews:

- Agency PREA Coordinator
- Facility Warden
- PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Staff Who Supervise Inmates in Segregated Housing
- Inmates Who Reported Sexual Abuse
- Random Inmate Interviews
- Targeted Inmate Interviews

Site Review Observations:

- Observed custody housing assignments.

Standard Subsections:

(A) Agency policy (030601) dictates that “inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers.” Interviews with inmates did not suggest that John Lilley CC utilizes any form of restrictive housing as a primary means of involuntary separation for investigatory purposes. In speaking with the John Lilley CC PCM and the John Lilley CC Warden, staff confirm that there have not been any (0) inmates placed in the involuntary segregated housing during the audit time frame. As such, there wasn’t any relevant documentation to review.

(B) Policy (030601) mandates that “inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges,

	education or work opportunities the facility shall document: the opportunities that have been limited; the duration of limitation; and the reasons for such limitations." Interviews with inmates did not suggest that John Lilley CC utilizes any form of restrictive housing as a primary means of involuntary separation for investigatory purposes. In speaking with the John Lilley CC PCM and the John Lilley CC Warden, staff confirm that there have not been any (0) inmates placed in involuntary segregated housing during the audit time frame. As such, there wasn't any relevant documentation to review. (C) Agency policy (030601) requires that, if necessary, "the facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days." Interviews with inmates did not suggest that John Lilley CC utilizes any form of restrictive housing as a primary means of involuntary separation for investigatory purposes. In speaking with the John Lilley CC PCM and the John Lilley CC Warden, staff confirm that there have not been any (0) inmates placed in involuntary segregated housing during the audit time frame. As such, there wasn't any relevant documentation to review. (D) Agency policy (030601) requires that "if an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: the basis for the facility's concern for the inmate's safety; and the reason why no alternative means of separation can be arranged." Interviews with inmates did not suggest that John Lilley CC utilizes any form of restrictive housing as a primary means of involuntary separation for investigatory purposes. In speaking with the John Lilley CC PCM and the John Lilley CC Warden, staff confirm that there have not been any (0) inmates placed in involuntary segregated housing during the audit time frame. As such, there wasn't any relevant documentation to review. (E) Agency policy (030601) requires that if an involuntary segregated housing assignment is utilized, "every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population." Interviews with inmates did not suggest that John Lilley CC utilizes any form of restrictive housing as a primary means of involuntary separation for investigatory purposes. In speaking with the John Lilley CC PCM and the John Lilley CC Warden, staff confirm that there have not been any (0) inmates placed in involuntary segregated housing during the audit time frame. As such, there wasn't any relevant documentation to review. Reasoning & Findings Statement:

	This standard works to ensure that inmates at risk of sexual victimization are not simply housed inside of involuntary protective custody as a de facto management solution for administrative safety concerns. Agency policy explicitly mandates that staff refrain from placing inmates at high risk for sexual victimization inside of involuntary segregated housing unless an assessment of all available alternatives has been made and there are no other available means of separation from likely abusers. Correctional staff routinely assigned to work within Segregated Housing were interviewed. While these staff confirmed that inmates assigned to involuntary segregated housing for high risk of sexual victimization would be afforded similar activities as inmates within general population, to the best of their knowledge, there has not been any such inmates assigned to such housing within the audit time frame. In speaking with the John Lilley CC PCM and the John Lilley CC Warden, staff confirmed that there have not been any (0) inmates placed in involuntary segregated housing for risk of sexual safety during the audit time frame. Additionally, no inmates stated that they had been placed in such housing. As such, there wasn't any relevant documentation to review. In total, the John Lilley CC has satisfied all component parts of this standard.

115.51	**Inmate reporting**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · ODOC, OP-050109, Reporting Incidents, 3-29-22 · ODOC MOU with Oklahoma State Bureau of Investigation, 9-8-25 · ODOC Cell Assessment Paper Form · ODOC Cell Assessment Electronic Form · ODOC, OP-030102, Self Report Form, English, 05/21 · ODOC, OP-030102, Self Report Form, Spanish, 05/21 · ODOC PREA Poster for Employees

	· ODOC PREA Poster for Inmates and Visitors · ODOC PREA Poster: Arabic, Hmong · ODRC Sexual Abuse Advocacy Brochure: Chinese, Laotian · ODRC Sexual Abuse Advocacy Poster: French, Marshallese, Thai, Vietnamese · ODRC PREA Brochure: Spanish · ODRC Reporting Poster: Samoan · ODRC Instructions to Call PREA Hotline: German, Romanian · ODRC Privacy Notice, Female Facilities: Japanese · ODRC Privacy Notice, Male Facilities: Korean · ODOC Inmate Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 · ODOC Inmate Orientation Handbook, English · ODOC Inmate Orientation Handbook, Spanish · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Advocacy and Reporting Brochure, English · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 · JLCC Initial Orientation Verification Form: 2-28-23, 10-17-23a, 10-17-23b, 10-17-23c, 2-21-24, 5-17-24, 9-5-24, 9-11-24, 11-13-24, 1-15-25a, 1-15-25b, 1-24-25, 6-10-25,

	6-11-25, 6-18-25, 7-23-25, 8-20-25, 8-26-25, 9-3-25, 9-9-25, 9-10-25, 9-18-25, 10-24-25, 10-29-25, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-1-26, 4-7-26, 4-8-26a, 4-8-26b, 4-8-26c, 4-17-26, 4-28-26a, 4-28-26b, 5-19-26 · JLCC Zero Tolerance Acknowledgements for Inmates: 3-7-23, 11-16-23, 2-21-24, 5-21-24, 7-31-24, 9-11-24a, 9-11-24b, 9-11-24c, 11-13-24, 1-15-25a, 1-15-25b, 1-29-25, 6-11-25, 6-12-25, 7-11-25, 8-26-25, 9-3-25a, 9-3-25b, 9-10-25, 9-18-25a, 9-18-25b, 10-29-25a, 10-29-25b, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 1-14-26a, 1-14-26b, 1-14-26c, 1-14-26d, 1-21-26, 2-4-26a, 2-4-26b, 2-4-26c, 2-11-26a, 2-11-26b, 2-13-26, 2-18-26, 3-2-26, 3-6-26a, 3-6-26b, 3-6-26c, 3-11-26, 3-23-26, 3-25-26a, 3-25-26b, 3-26-26, 3-27-26, 4-1-26, 4-2-26, 4-3-26, 4-7-26a, 4-7-26b, 4-8-26a, 4-8-26b, 4-8-26c, 4-9-26a, 4-9-26b, 4-9-26c, 4-10-26, 4-13-26a, 4-13-26b, 4-13-26c, 4-13-26d, 4-16-26, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Zero Tolerance Acknowledgements for Inmates, Spanish: 8-4-26 Interviews: • Agency Head • Agency PREA Coordinator • JLCC Warden • JLCC PREA Compliance Manager • Random Staff • Just Detention International • Community-Based Victim Advocacy Staff • Random Inmates Site Review Observations:

	• Reviewed documentation related to inmate reports of sexual abuse and sexual harassment. • Observed PREA Risk Screening process and assessments. • Observed informational posters throughout the facility advising inmates of various reporting mechanisms for allegations of sexual abuse and sexual harassment. • Observed numerous PREA educational and reporting references available for inmate use within the facility Law Library and tablets. • Observed PREA informational video. • Observed inmate general visitation and legal visitation informational posters. • Observed visitation area designated for members of an approved victim advocate service. • Tested PREA Hotline number inmates can use to engage in inmate reporting. Standard Subsections: (A) The agency provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, as well as neglect or violations of staff responsibilities that may have contributed to such incidents. As noted in policy (030601), inmates have “the option to report the incident to a designated staff member or any other staff. Other reporting methods include: facility/unit head, third party contacts, PREA Hotline, sick call, request to staff, anonymous, Office of Inspector General or the Oklahoma State Bureau of Investigations.” These methods can all be used to make reports anonymously. Additionally, inmates may use these same methods to report any subsequent retaliatory measures experienced as a result of having reported said abuse. Upon receipt onto the facility, all inmates are provided a PREA risk screening, via the Cell Assessment Form, and advised of their right to be free of sexual abuse and sexual harassment under the PREA standards. Inmates are subsequently given a more comprehensive inmate orientation within seven (7) days of their admittance into the facility. This orientation includes detailed training on the JLCC PREA program. This training includes information on, and contact information for, internal and external reporting agencies. Inmates are also provided with an JLCC Inmate Orientation Handbook, which contains contact information for internal and external reporting agencies and victim services organizations. In interviewing staff, all employees were aware of inmates’ right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. In interviewing inmates, all inmates were equally aware of their right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. During random and targeted interviews, all inmates were able to articulate at least one (1) manner by which a

report could be made, with the majority of inmates being able to provide multiple reporting methods.

(B) The facility also provides at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. Namely, inmates are notified that they may report said allegations to the Oklahoma State Bureau of Investigation, which can receive and immediately forward inmate reports to agency officials for their investigation. Upon a inmate's request, the Oklahoma State Bureau of Investigation will allow a inmate to remain anonymous. Per the agency PREA Coordinator, reporting detailed reporting information is available to all inmates via their institutional handbooks, as well as posted throughout the facility. The PREA Coordinator also noted that information on how to contact relevant consular officials and officials at the Department of Homeland Security is available for all inmates, to include those detained for civil immigration purposes.

(C) Per policy (050109, 030601), staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. All employees interviewed stated that they would act on any report of sexual abuse or sexual harassment regardless of the manner by which they became aware of that information. In doing so, staff stated that they would subsequently document all such reports via an Incident/Staff Report. All inmates interviewed affirmed their right to make either verbal or written reports of sexual abuse and sexual harassment. Most inmates were also aware that they could make reports of sexual abuse and sexual harassment via third party or anonymously. Lastly, most inmates interviewed stated that they believed JLCC staff would take any complaint of sexual safety seriously and act accordingly to address their concerns.

(D) Per policy (050109, 030601), staff have an affirmative duty to report any knowledge, suspicion, or information they may have regarding sexual abuse, sexual harassment, or retaliation against inmates or staff for having reported such abuse. Nonetheless, staff are also provided several means to privately report sexual abuse or sexual harassment; namely, by notifying the Office of Inspector General, calling the PREA Reporting Line, or by emailing the agency PREA Coordinator. When asked, all staff knew of at least one (1) way to make private or anonymous reports of sexual abuse and sexual harassment.

Reasoning & Findings Statement:

This standard ensures that inmates have multiple internal avenues to report allegations of sexual abuse and sexual harassment. Agency policy allows for these

	reports to be made verbally, in writing, anonymously, and by a third-party. These reports can be made to any staff, contractor, intern, or volunteer in person, as well as a host of employees within unit administration via paper kites or electronically through inmate tablets. Inmates can also make reports of sexual abuse and sexual harassment to a designated outside entity, the Oklahoma State Bureau of Investigation, which can receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, such as the ODOC PREA Coordinator's Office. Reports to the Oklahoma State Bureau of Investigation may also be made anonymously. The facility did have, and supplied for review, a memorandum of understanding with the Oklahoma State Bureau of Investigation to ensure the continued facilitation of these calls. In speaking with the John Lilley CC PCM, it was noted that all inmates are provided detailed instructions, contact persons, phone numbers, e-mail addresses, and physical addresses for correspondence where allegations of sexual abuse, sexual harassment, and retaliation for reporting such may be reported. In interviewing Random Staff, all employees were aware that inmates could report allegations of sexual abuse and sexual harassment verbally, in writing, anonymously, and through a third party. When receiving verbal reports of sexual abuse and sexual harassment, all staff recognized the need to take immediate action to protect the inmate in question and the need to document the verbal complaint as soon as possible. In speaking with inmates, all persons were aware of their right to be free from sexual abuse and sexual harassment, as well as their right not to suffer retaliation for having reported such abuse. All inmates understood their right to make verbal and written complaints, with most understanding their right to make anonymous and third-party complaints. In speaking with inmates, it was noted that all inmates were aware of the reporting hotline, with most inmates being aware that reports to that hotline could also be made free of charge and anonymously. While inmates are not encouraged to utilize rape counseling support service centers as reporting avenues, they will also serve in this capacity if explicitly requested by the inmate. With this in mind, the auditor solicited inmate contact information from one rape counseling center central to the JLCC and a nationally based referral service. The referral service, Just Detention International, indicated that it did not receive any complaints of sexual abuse or sexual harassment from inmates assigned to the JLCC within the reporting time frame. Sac and Fox Nation, a local rape counseling advocacy service, was also contacted and asked to provide relevant information specific to the JLCC PREA audit. Lastly, the auditor conducted a test of the PREA Reporting Hotline number commonly referenced by inmates. A confirmation response was received on the same business day. As such, it is evident that the John Lilley CC has exceeded the requirements of this standard.

115.52	**Exhaustion of administrative remedies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents:

· ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21

· ODOC, OP-090124, Inmate/Offender Grievance Process, 1-18-22

· JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25

Interviews:

· JLCC Warden

· Operation Compliance Manager

• Investigative Staff

• Random Inmates

Site Review Observations:

· Reviewed complaint submission process.

Standard Subsections:

(A) The John Lilley CC does have administrative procedures (090124) to address inmate grievances regarding sexual abuse or sexual harassment. In this, “grievances may be submitted directly to the reviewing authority without informal resolution process when the complaint is of a sensitive nature or when substantial risk of personal injury, sexual assault, or other irreparable harm exists.” During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment.

(B) Policy (090124) explicitly notes that “there will be no time limit to any portion of a grievance regarding an allegation of sexual abuse.” In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment.

(C) Policy (090124) indicates that “grievances may be submitted directly to the reviewing authority without informal resolution process when the complaint is of a sensitive nature or when substantial risk of personal injury, sexual assault, or other irreparable harms exists.” In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment.

(D) Policy (090124) requires that “upon receipt of a grievance marked ‘emergency’ or ‘sensitive,’ the reviewing authority will have 24 hours to determine if it is a fact an emergency or sensitive grievance. If so, an expedited review will be conducted and a response provided to the inmate/offender within 48 hours of receipt, excluding weekends and holidays.” In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment.

(E) Policy (090124) allows “third parties, including fellow inmates/offenders, staff members, family members, attorneys, and outside advocates will be permitted to assist inmate/offenders in filing requests for administrative remedies relating to allegations of sexual abuse and will also be permitted to file such requests on behalf of inmates/offenders.” It is further noted that “if the inmate/offender declines to have the request processed on their behalf, the agency will document the inmate’s offender’s decision.” In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment.

(F) Policy (090124) advised inmates that “grievances may be submitted directly to the reviewing authority without informal resolution process when the complaint is of a sensitive nature or when substantial risk of personal injury, sexual assault, or other irreparable harm exists.” Additionally, “upon receipt of a grievance marked ‘emergency’ or ‘sensitive,’ the reviewing authority will have 24 hours to determine if it is a fact an emergency or sensitive grievance. If so, an expedited review will be conducted and a response provided to the inmate/offender within 48 hours of receipt, excluding weekends and holidays.” In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment.

	(G) Policy (090124) provides that “when the appropriate reviewing authority determines that a grievance is not of an emergency or sensitive nature, the inmate/ offender will be provided written notification that the grievance is not of an emergency or sensitive nature and that the standard grievance process must be followed. In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the John Lilley CC did not receive any (0) grievances regarding sexual abuse or sexual harassment. Reasoning & Findings Statement: This standard works to ensure inmate access to courts by way of exhausting administrative remedies specific to allegations of sexual abuse and sexual harassment. Policy does permit inmates to submit grievances alleging sexual abuse and sexual harassment. The agency investigates all such allegations. In this, the reviewing authority, in coordination with unit administration, then processes the allegations as a formal sexual abuse or sexual harassment complaint. Documentation supporting the submission of grievance process was reviewed to confirm John Lilley CC staff would investigate and respond to such grievances in a timely fashion. In speaking with inmates, several noted the filing of a grievance as a means to inform staff of sexual abuse or sexual harassment allegations. During the audit time frame, the JLCC did not receive any (0) grievances regarding sexual abuse or sexual harassment. Nonetheless, as the proper submission of a inmate complaint alleging sexual abuse and sexual harassment constitutes exhaustion of administrative remedies, the John Lilley CC meets the provisions of this standard.

115.53	**Inmate access to outside confidential support services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-030119, Inmate Telephone Privileges, 10-11-22 · ODOC PREA Poster for Employees · ODOC PREA Poster for Inmates and Visitors

	· ODOC PREA Poster: Arabic, Hmong · ODRC Sexual Abuse Advocacy Brochure: Chinese, Laotian · ODRC Sexual Abuse Advocacy Poster: French, Marshallese, Thai, Vietnamese · ODRC PREA Brochure: Spanish · ODRC Reporting Poster: Samoan · ODRC Instructions to Call PREA Hotline: German, Romanian · ODRC Privacy Notice, Female Facilities: Japanese · ODRC Privacy Notice, Male Facilities: Korean · ODOC Inmate Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 · ODOC Inmate Orientation Handbook, English · ODOC Inmate Orientation Handbook, Spanish · ODOC Qualified Staff Member for Victim Advocate, nd · DOJ, A National Protocol for Sexual Assault Medical Forensic Examinations, 09/24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Qualified Staff Member for Victim Advocate, 7-31-26 · JLCC MOU Sac and Fox Nation SANE and Advocacy Services, 2-10-26 · JLCC Inmate Orientation Manual, 2-17-26 · JLCC Advocacy and Reporting Brochure, English · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b,

	10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 · JLCC Initial Orientation Verification Form: 2-28-23, 10-17-23a, 10-17-23b, 10-17-23c, 2-21-24, 5-17-24, 9-5-24, 9-11-24, 11-13-24, 1-15-25a, 1-15-25b, 1-24-25, 6-10-25, 6-11-25, 6-18-25, 7-23-25, 8-20-25, 8-26-25, 9-3-25, 9-9-25, 9-10-25, 9-18-25, 10-24-25, 10-29-25, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-1-26, 4-7-26, 4-8-26a, 4-8-26b, 4-8-26c, 4-17-26, 4-28-26a, 4-28-26b, 5-19-26 · JLCC Zero Tolerance Acknowledgements for Inmates: 3-7-23, 11-16-23, 2-21-24, 5-21-24, 7-31-24, 9-11-24a, 9-11-24b, 9-11-24c, 11-13-24, 1-15-25a, 1-15-25b, 1-29-25, 6-11-25, 6-12-25, 7-11-25, 8-26-25, 9-3-25a, 9-3-25b, 9-10-25, 9-18-25a, 9-18-25b, 10-29-25a, 10-29-25b, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 1-14-26a, 1-14-26b, 1-14-26c, 1-14-26d, 1-21-26, 2-4-26a, 2-4-26b, 2-4-26c, 2-11-26a, 2-11-26b, 2-13-26, 2-18-26, 3-2-26, 3-6-26a, 3-6-26b, 3-6-26c, 3-11-26, 3-23-26, 3-25-26a, 3-25-26b, 3-26-26, 3-27-26, 4-1-26, 4-2-26, 4-3-26, 4-7-26a, 4-7-26b, 4-8-26a, 4-8-26b, 4-8-26c, 4-9-26a, 4-9-26b, 4-9-26c, 4-10-26, 4-13-26a, 4-13-26b, 4-13-26c, 4-13-26d, 4-16-26, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Zero Tolerance Acknowledgements for Inmates, Spanish: 8-4-26 Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Medical Staff · Mental Health Staff · SAFE and/or SANE Personnel of Sac and Fox Nation

	· Mailroom Staff · Random Staff · Just Detention International · Community-Based Victim Advocacy Staff · Random Inmates · Inmates Who Disclosed Sexual Victimization During Risk Screening Site Review Observations: · Reviewed PREA Cell Assessment Form. · Review of distributed information upon JLCC reception at Intake area. · Observed informational posters throughout the facility advising inmates, employees, and visitors of various reporting mechanisms for allegations of sexual abuse and sexual harassment. · Observed numerous PREA educational and reporting references available for inmate use within the facility Law Library and tablet. · Observed inmate general visitation and legal visitation informational posters. · Observed visitation area designated for members of an approved victim advocate service. · Tested PREA Hotline number inmates can use for access to confidential rape crisis counseling services. Standard Subsections: (A) Policy (030601) requires that “the facility shall maintain or attempt to enter into a memoranda of understanding (MOU) or other agreements with community service providers who are able to provide inmates with confidential emotional support services related to sexual abuse. If an MOU/agreement is entered into, the facility will provide inmates access to the contact information for the community service provider as outlined in the MOU/agreement.” The JLCC Inmate Handbook, 2025, provides contact information for reporting sexual abuse and sexual harassment. Via institutional awareness posters, inmates are also provided the physical address to write for confidential emotional support services. Inmate pamphlets also provide the

	contact information for a local rape crisis center; namely, Sac and Fox Nation. During inmate interviews, many were aware that this information was provided to them via their Inmate Handbook and all were aware this information could be found on advisement notices posted throughout the facility, to include near the phones in their housing units. (B) Per policy (030119) inmates are notified that general outgoing calls are subject to monitoring. When interviewed, most inmates indicated their awareness, by way of the information provided on the sexual abuse posters or via the sexual abuse prevention video, that call made to the PREA Hotline and to rape crisis centers were subject to monitoring. (C) The JLCC has negotiated a contract between itself and Sac and Fox Nation, a local advocacy service, to help provide rape crisis support services as requested by inmates assigned to the JLCC. The JLCC does maintain, and did supply, a facility-based contract for review. Reasoning & Findings Statement: This policy works to ensure that inmates assigned to the JLCC have access to outside confidential rape crisis support services and that access is provided in the most confidential manner as possible. Inmates are advised that calls to rape crisis centers are subject to monitoring. The JLCC has also secured a memorandum of understanding with a local rape crisis center, Sac and Fox Nation, for support services. When interviewed, all employees and inmates knew that the agency provided free emotional support or mental health services to inmates upon request. As well, many inmates knew that they could initiate access to those services by contacting the rape crisis center using the information posted on the PREA awareness posters predominately displayed throughout the facility. As such, the JLCC has met the minimum standards of this provision.

115.54	**Third-party reporting**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21

	ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires ODOC, OP-050109, Reporting Incidents, 3-29-22 ODOC MOU with Oklahoma State Bureau of Investigation, 9-8-25 ODOC Cell Assessment Paper Form ODOC Cell Assessment Electronic Form ODOC, OP-030102, Self Report Form, English, 05/21 ODOC, OP-030102, Self Report Form, Spanish, 05/21 ODOC PREA Poster for Employees ODOC PREA Poster for Inmates and Visitors ODOC Inmate Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 ODOC Inmate Orientation Handbook, English ODOC Inmate Orientation Handbook, Spanish JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Advocacy and Reporting Brochure, English · JLCC Inmate Orientation Manual, 2-17-26 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 · JLCC Zero Tolerance Acknowledgements for Inmates: 3-7-23, 11-16-23, 2-21-24, 5-21-24, 7-31-24, 9-11-24a, 9-11-24b, 9-11-24c, 11-13-24, 1-15-25a, 1-15-25b, 1-29-25, 6-11-25, 6-12-25, 7-11-25, 8-26-25, 9-3-25a, 9-3-25b, 9-10-25, 9-18-25a, 9-18-25b, 10-29-25a, 10-29-25b, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 1-14-26a, 1-14-26b, 1-14-26c, 1-14-26d, 1-21-26, 2-4-26a, 2-4-26b, 2-4-26c, 2-11-26a, 2-11-26b, 2-13-26,

	2-18-26, 3-2-26, 3-6-26a, 3-6-26b, 3-6-26c, 3-11-26, 3-23-26, 3-25-26a, 3-25-26b, 3-26-26, 3-27-26, 4-1-26, 4-2-26, 4-3-26, 4-7-26a, 4-7-26b, 4-8-26a, 4-8-26b, 4-8-26c, 4-9-26a, 4-9-26b, 4-9-26c, 4-10-26, 4-13-26a, 4-13-26b, 4-13-26c, 4-13-26d, 4-16-26, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Zero Tolerance Acknowledgements for Inmates, Spanish: 8-4-26 Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Investigative Staff · Random Inmates · JLCC Website Third Party Reporting Coordinator · Just Detention International · Community-Based Victim Advocacy Staff Site Review Observations: · Review ODOC website specific to PREA and third-party reporting methods · Tested ODOC online third-party reporting system. · Tested PREA Hotline number inmates can use to engage third-party reporting. · Observed the Inmate Visitation Area informational posters. · Observed informational postings and other publications throughout the inmate housing areas. · Observed PREA reporting information available in the Law Library and on inmate tablets.

	Standard Subsections: (A) Policy (030601) allows for the use of third-party reporting on allegations of sexual abuse and sexual harassment. During the onsite review, signage throughout the facility encouraged inmates to third-party report if needed. Additional literature, such as sexual abuse resource pamphlets and the JLCC Inmate Orientation Handbook, also provided detailed contact information for both self-reporting and reporting on behalf of another inmate. As well, public notices on PREA reporting, specifically third-party reporting, were available for review by inmate family and friends via the facility's Inmate Visitation Room. Additionally, public notice on third party PREA reporting is available to the general public on the agency's website. To verify the system was operational, the auditor submitted a test email to the agency's online reporting address, with responsive comments being returned within two business days. As well, the PREA Hotline used by inmates was also tested for functionally and service. A response was received back from the hotline and forwarded to the agency, as well as the facility, within the same business day. Documentation review reflected that JLCC staff would accept and process third-party PREA allegations to the same extent as complaints made by affected inmates. All staff interviewed confirmed that the JLCC would accept third-party reports of sexual abuse. As well, all inmates interviewed believed that the facility would accept, and take seriously, any allegations of sexual abuse reported by a third party. Reasoning & Findings Statement: This standard works to ensure a publicly available third-party reporting mechanism exists for claims of sexual abuse and sexual harassment being inflicted upon inmates. In accordance with policy, the JLCC promotes the use of third-party reporting via informational posters and other literature spread out across the facility, to include the Inmate Visitation Area. Electronic contact information is freely distributed on the agency's website to allow the general public direct access to reporting options, either by phone, letter, or email. To ensure the functionality of the JLCC site, all electronic links were tested and found to be operating as required. To ensure the functionality of the JLCC online third-party reporting system, a test submission was successfully sent. As well, PREA informational posters and the inmate PREA training video also provide inmates with a plethora of agency telephone numbers, physical addresses, and electronic contact methods that can be used to make a third-party report. While inmates themselves should not be able to access Internet resources, they can communicate this reference information to their family, friends, and personal advocates. Inmates themselves are provided numerous state and advocacy addresses to submit third-party correspondence. As well, inmates may also make a third-party party complaint via any staff member or other PREA reporting mechanisms, such as the PREA Hotline. The PREA Hotline was tested for functionality and service. When interviewed, all staff, as well as all inmates, were aware that the

	facility would accept and investigate third-party complaints of sexual abuse and sexual harassment from inmate advocates. Accordingly, the JLCC has exceeded the provisions of this standard.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, PREA for New Employees PowerPoint Slides, 2022 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 · ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum · ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24

· ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23

· ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24

Interviews:

· Agency PREA Coordinator

· JLCC Warden

· JLCC PREA Compliance Manager

· Investigative Staff

· Medical Staff

· Mental Health Staff

· Random Staff

· Random Inmates

Site Review Observations:

· Employee training records

Standard Subsections:

(A) Policy (030601) mandates that all staff, volunteers, and contractors must immediately report all “knowledge, suspicion, or other information regarding an incident of sexual abuse, assault or harassment that occurred in a facility/unit or other location, whether or not it is part of the agency.” As well, staff have an affirmative duty to report all knowledge, suspicion, or information regarding retaliation against inmates or staff for having reported an incident of sexual abuse and sexual harassment. Staff also have an affirmative duty to report any negligence or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment, or retaliation. A review of employee training records, as well as training curriculum records, reflects that all JLCC staff had received initial PREA training, including acknowledgment of their affirmative duty responsibilities.

	When interviewed, all staff confirmed their obligation to immediately report any information they might have regarding allegations of sexual abuse and sexual harassment. (B) Policy (030601) notifies all staff that “all documents associated with claims of sexual assault, including incident reports, investigative reports, inmate information, case disposition, medical and mental health evaluation findings and recommendations for post release treatment and/or counseling are confidential and retained by ODOC. All investigative files are considered confidential information.” As such, employees are cautioned to share reported information only with authorized staff. Random staff interviews confirm that facility employees are aware of the sensitive and confidential nature of said complaints. In speaking with the JLCC PREA Compliance Manager, the totality and reasoning surrounding the confidential investigatory process was clearly explained. (C) Policy (030601) requires that medical and mental health practitioners have a duty to disclose their mandatory reporting status, including limitations of confidentiality. During interviews with medical and mental health services staff, the need for said staff to inform inmates (at the initiation of professional services) of their duty to report, as well as to their limitations of confidentiality, was affirmed. (D) All inmates incarcerated within the JLCC are legally classified as adults. As such, there aren’t any juveniles assigned to this facility. However, the facility may still have persons classified as vulnerable adults. Per state law, if a inmate is considered a vulnerable adult the institution is required to notify the Oklahoma Department of Human Services. During the audit time frame, JLCC did not have any (0) instances of required reporting for vulnerable adults. (E) Policy (030601) mandates that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are referred to the Oklahoman Office of Inspector General for processing. When interviewing random facility staff, all employees affirmatively responded that any reports of sexual abuse and sexual harassment received by them would be immediately referred to supervisory and/or other entities appropriate for further investigations. Reasoning & Findings Statement: This standard ensures an effective and efficient response to allegations of sexual abuse and sexual harassment. Paramount to this process is the understanding that all

	staff and facility officials, regardless of their capacity inside the institution, have an absolute duty to report any knowledge, information, or even suspicion of sexual abuse or sexual harassment, as well as any knowledge, information, or suspicion of any retaliation having occurred for anyone who has reported allegations of sexual abuse and sexual harassment. The ODOC, and by extension, the John Lilley CC, has numerous policies in place directing staff of their reporting responsibilities. Interviews with First Responders, Random Staff, Medical Staff, and Mental Health Staff reflect their complete awareness of agency reporting requirements, to include the confidential nature of the reporting process. Considering this, policy requires that all medical and mental health staff disclose their limits of confidentially and obtain informed consent prior to the initiation of services. All allegations of sexual abuse and sexual harassment, to include third-party and anonymous reports, are sent to agency investigators for review. The John Lilley CC does have the capacity to hold juvenile offenders. In the event a juvenile offender or a vulnerable adult alleges sexual abuse, agency investigators are aware of their reporting duties to designated state authorities. Interviews with John Lilley CC staff expressed their compliance with agency policy. Training records and course curriculums document employee, contactor, and volunteer training specific to mandatory reporting requirements. In interviewing John Lilley CC medical and mental health staff, the process of limited confidential and informed consent used by said staff was explained in detail. In total, the John Lilley CC has complied with all provisions within this standard and has thus met all requirements therein.

115.62	**Agency protection duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · ODOC, PREA for New Employees PowerPoint Slides, 2022 · ODOC PREA Poster for Employees, English · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c,

	2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 · ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum · ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24 · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23 · ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24 Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Designated Staff Member Charged with Monitoring Retaliation · Incident Review Team Member · Intermediate or Higher-Level Facility Staff · Investigative Staff

	· Intake Staff · Staff Who Perform Screening for Risk of Victimization and Abusiveness · Medical Staff · Mental Health Staff · Random Staff · Random Inmates · Inmates Who Reported Sexual Abuse · Inmates Who Disclosed Sexual Victimization During Risk Screening Site Review Observations: · Review of retaliation monitoring documentation Standard Subsections: (A) Per policy (30601), “when the agency learns an inmate is subject to a substantial risk of imminent sexual abuse, it shall take action to protect the inmate.” In speaking with the JLCC Warden and random staff, a plethora of possible options were discussed specific to inmate protection measures. As the JLCC did not find any evidence within the audit time frame that any (0) inmates assigned to the facility were at a substantial risk of sexual abuse, the facility has no documentation for review. Likewise, no protective actions were required. Reasoning & Findings Statement: This standard works to ensure that the John Lilley CC takes appropriate measures upon learning that any inmate is subject to a substantial risk of imminent sexual abuse. Specifically, this standard requires that immediate action is taken to protect the inmate. To that end, the ODOC, and by extension, the John Lilley CC, has policies in place to promote the safety of all inmates who might otherwise be victims, or potential victims, of sexual abuse and sexual harassment. Agency policy requires staff to take immediate action to ensure the safety of all inmates who are at a high risk of sexual victimization. Provided there are no other alternative options available to ensure the inmate’s safety, further allows the facility to immediately increase the

	safety of the at-risk inmate by placing said inmate in the involuntary segregated housing. However, placement in involuntary segregated housing would only be used if no other general housing assignments available could ensure inmate safety. During the audit time frame, the John Lilley CC did not receive any (0) reports from inmates who were at a substantial risk of sexual abuse. In interviewing Random Staff, all persons were asked specifically what actions would be taken if an inmate presented as a high risk for sexual victimization. Unequivocally, all staff responded that they would take immediate action to protect the potential victim. Additionally, supervisory staff were questioned as to their role in this potentially dangerous situation. While supervisory staff did provide a more technical and inclusive response, they too, were centrally focused on protecting the inmate. With this in mind, John Lilley CC staff have clearly articulated their responsibilities within this standard. As well, a review of investigative reports supports the fact that the John Lilley CC is committed to engaging in its protection duties.

115.63	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · ODOC, PREA for New Employees PowerPoint Slides, 2022 · ODOC PREA Poster for Employees, English · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 Interviews:

	· Agency Head · JLCC Warden · JLCC PREA Compliance Manager · Inmates Who Reported Sexual Abuse · Inmates Who Disclosed Sexual Victimization During Risk Screening Site Review Observations: · Review of facility-to-facility referral process. Standard Subsections: (A) JLCC policy (030601) requires that when a facility receives notice regarding allegations of sexual abuse and sexual harassment occurring at another facility, the head of the facility who received the allegations must provide documented notice of these allegations to the of the head of the destination facility within 72 hours. A review of documents within the audit time frame reflects that there have not been any (0) referrals made from JLCC to another facility and no (0) referrals received by JLCC from another facility. As such, there wasn't any documentation to review. However, an explanation of the process, when applicable, was given by the facility warden. (B) Per JLCC policy (030601), written notice of the aforementioned allegations must be provided as soon as possible, but not more than 72 hours after learning of the allegations. The JLCC Warden confirmed that all notices are sent by the Administrator's Office to the destination facility as soon as possible, but certainly within 72 hours. (C) When received, the JLCC does document this notification in accordance with policy (030601). (D) Upon receipt of said allegations, policy (030601) requires that the "facility/unit head or office receiving such notification shall ensure the allegation is reported to the OIG for investigation." During the audit time frame, the JLCC did not receive any (0)

	allegations from other facilities. Reasoning & Findings Statement: This standard requires the timely communication of sexual abuse and sexual harassment across facilities within a correctional agency or even across agencies themselves. The ODOC has policies in place to ensure that its staff, as well as the staff from other possible agencies, are provided sufficient due process with respect to the timely notification of inmate allegations involving sexual abuse and sexual harassment. Within the audit time frame, the John Lilley CC has not received any (0) outgoing allegation of sexual abuse and sexual harassment from inmates who reported to John Lilley CC staff that such an incident occurred at another facility. Within the audit time frame, the John Lilley CC did not receive any (0) incoming allegations of sexual abuse and sexual harassment from an inmate who reported such at another facility. In speaking with the John Lilley CC Warden, a detailed explanation of this process, to include required reporting timelines to be used when necessary, was provided. While there wasn't any relevant documentation to review, agency policy and an in-depth explanation of the collaborative notification process all reflect that the John Lilley CC has satisfied the provisions of this standard.

115.64	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · ODOC, PREA for New Employees PowerPoint Slides, 2022 · ODOC PREA Poster for Employees, English · ODOC Agency Staff with First Responder Card · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24,

	2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25 Interviews: · JLCC Warden · JLCC PREA Compliance Manager · JLCC Investigative Staff · Intermediate or Higher-Level Facility Staff · Random Staff · First Responders · Random Inmates · Inmates Who Reported Sexual Abuse · Inmates Who Disclosed Sexual Victimization During Risk Screening Site Review Observations: · Review of employee training records.

	· Review of investigator narrative case files. Standard Subsections: (A) Policy (030601) requires the first responding security staff member to immediately separate the alleged victim and abuser. After ensuring the safety of the victim, policy (030601) requires staff to preserve and protect the crime scene until evidence collection is possible. If the first responder learns that the victim has been sexually abused, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. Once the first responder learns that an inmate has been sexually abusive, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. Within the audit time frame, JLCC has not received any (0) allegations from inmates who claim to have been victims of sexual abuse. Interviews with staff who acted as first responders reflect that staff took the appropriate actions required of their role consistent with policy. As well, during contractor and volunteer interviews, it was noted that all contractors and volunteers understood the absolute need to protect the victim and notify supervisory staff as soon as possible. (B) Policy (030601) requires that non-security first responders notify their immediate supervisor or the security shift supervisor and instruct the victim not to take any action that could destroy physical evidence. Within the audit time frame, JLCC has not received any (0) allegations from inmates who claim to have been victims of sexual abuse. Interviews with non-security staff who served as first responders reflect that non-security staff would take the appropriate actions required of their role consistent with policy. Reasoning & Findings Statement: This standard works to ensure both security and non-security staff understand their role in responding to allegations of sexual abuse. Agency policy clearly describes the function of each first responder, with security and non-security staff being equally responsible for separating the alleged victim and abuser, as well as preserving and protecting any possible evidence either at the scene or on the victim. Interviews with

	First Responders reflect that both security and non-security staff have been trained on those responsibilities. As well, during contractor and volunteer interviews, it was noted that all contractors and volunteers understood the absolute need to protect the victim, as well as a need to preserve and protect the crime scene or evidence that could be available. A review of employee, contractor, and volunteer training record, as well as their class curriculums, reflect staff have received required training specific to the preservation of evidence regarding allegations of sexual abuse and sexual harassment. John Lilley CC documentation in response of allegations of sexual abuse also reflects staff awareness of their responsibilities when responding to such allegations. As such, the John Lilley CC has satisfied all requirements of this standard.

115.65	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-050109, Reporting of Incidents, 3-39-22 · ODOC, OP-140201, Mental Health Services Duties and Responsibilities, 6-25-24 · ODOC, OP-040117, Investigations, 9-12-22 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Designated Staff Member Charged with Monitoring Retaliation · Incident Review Team Member · Intermediate or Higher-Level Facility Staff · Investigative Staff

	· Medical Staff · Mental Health Staff · SAFE and/or SANE Personnel of Sac and Fox Nation · Random Staff Site Review Observations: · Review of departmental level facility processes. Standard Subsections: (a) The JLCC has developed a written institutional plan; namely, JLCC's PREA Coordinated Response Plan, 10-1-25, to coordinate actions amongst first responders, medical and mental health practitioners, investigators, and facility leadership in response to incidents of sexual abuse and sexual harassment. Reasoning & Findings Statement: This standard works to ensure the facility has developed a calculated response plan to assist first responders and supervisory staff in the immediate processes needed for an effective and efficient response to allegations of sexual abuse. As required by this standard, the John Lilley CC has developed a written institutional plan; namely, John Lilley Coordinated Response Plan, 10-1-25, to coordinate actions taken amongst staff, contractors, interns, volunteers, first responders, medical staff, mental health staff, investigators, and facility leadership in response to alleged incidents of sexual abuse. Within this response plan, the roles of all facility staff are discussed and, perhaps even more importantly, the way those roles interact with one another are outlined. This policy is a conveniently written overview of departmental responsibilities, equipped with notification and referral reminders. When asked, various departmental staff were able to articulate their role within the response plan. As well, during inmate interviews, many were able to specify the responsibilities of responding staff. Accordingly, the John Lilley Coordinated Response Plan, 10-1-25, has been clearly institutionalized throughout facility culture. In total, John Lilley CC has met the requirements of this standard.

115.66	**Preservation of ability to protect inmates from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: · Agency Head · Agency Contract Administrator · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Administrative (Human Resources) Staff · Inmates Who Reported Sexual Abuse · Inmates Who Disclosed Sexual Victimization During Risk Screening Site Review Observations: · Oklahoma is a right to work state as of September, 2001. Standard Subsections: (A) Per policy the Agency PREA Coordinator, the agency is 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 inmates

	pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. As such, the ODOC, and by extension, the JLCC retains the management rights to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. (B) The auditor is not required to audit this provision. Reasoning & Findings Statement: This provision allows the agency to protect inmates from having contact with sexual abusers and sexual harassers. Policy allows for employees to be suspended from duty, or otherwise removed from contact with inmates, pending the outcome of a sexual abuse or sexual harassment investigation. In speaking with investigative staff and the JLCC Warden, the process of suspending or separating an employee from employment as a function of a negative sexual abuse or sexual harassment investigation finding was explained. It was also noted that the ODOC; more specifically, JLCC facility administration, has no reservations about discharging employees for engaging in sexual abuse and sexual harassment. Hence, the JLCC has satisfactorily met all provisions within this standard.

115.67	**Agency protection against retaliation**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC PREA for New Employees PowerPoint Slides, 2022 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews:

	· Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Institutional Investigator · Designated Staff Member Charged with Monitoring Retaliation · Random Staff · Random Inmates Site Review Observations: · Reviewed process for utilizing retaliation monitoring logs. · Reviewed investigative files containing retaliation monitoring logs. Standard Subsections: (A) Policy (030601) prohibits retaliation for reporting sexual abuse or sexual harassment and for cooperating with a sexual abuse and sexual harassment investigations. In accordance with these policies, the JLCC Warden monitors all retaliation resulting from allegations of sexual abuse or sexual harassment. (B) Per policy (030601), the facility shall employ multiple protection measures, “such as housing changes, or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims”, as well as “engaging emotional support services such as mental health services for inmates and Employee Assistance Program for staff who fear retaliation for reporting sexual abuse or harassment or for cooperating with investigations.” In speaking with the JLCC Warden, it was noted that additional emotional support services, via Sac and Fox Nation, were also available for victims of sexual abuse. (C) Per policy (030601), for a minimum of 90 days following a report of sexual abuse or sexual harassment, the facility shall monitor “the conduct and treatment of the inmates or staff who reported the abuse and of inmates who were reported to have suffered sexual abuse for changes that may suggest possible retaliation by inmates

	or staff. Findings shall be reported to the facility/unit head who shall act promptly to remedy any such retaliation. The facility monitoring will include: § Inmate discipline or misconducts; § Housing, program or classification changes; § Negative job/performance reviews; § Reassignment of staff; § If the inmate or staff is transferred during this 90 day period, the facility head of the current facility shall notify the receiving facility head of the continued need for monitoring; § The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need; and § In the case of inmates, such monitoring shall also include periodic status checks.” (D) Per policy (030601), in the case of inmates, such monitoring shall also include periodic in-person status checks. Per the Facility warden, these checks occur at least every 30 days. Within the audit time frame, there have not been any (0) acts of retaliation noted for having engaged the PREA process. (E) As noted by the Facility warden, if any other individual (staff, volunteer, contractor, or inmate) who cooperates with an investigation expresses a fear of retaliation, the facility shall take appropriate measures to protect that individual against retaliation. Documentation reflects that within the audit time frame, there have not been any (0) expressed concerns of fear for retaliation due to having cooperated with, or having engaged, the PREA process. (F) The auditor is not required to audit this provision. Reasoning & Findings Statement: This standard works to prevent retaliation against employees and inmates for reporting sexual abuse and sexual harassment or for having cooperated with an investigation into such. JLCC policy provides a comprehensive overview of agency protection against sexual abuse and sexual harassment. In speaking with inmates, none noted that they had ever experienced retaliation for participating in a PREA related facility investigation. The Facility warden provided detailed explanations of the

	monitoring process, to include a review of retaliation monitoring forms for both staff and inmates. Given the totality of the policies provided and staff knowledge regarding the process, the JLCC has satisfied the basic provisions of this standard.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC PREA for New Employees PowerPoint Slides, 2022 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: • Facility Warden • PREA Compliance Manager • Designated Staff Member Charged with Monitoring Retaliation • Random Staff • Staff Who Supervise Inmates in Segregated Housing • Random Inmates Site Review Observations: • Observed segregated housing unit. • Review of investigative files. Standard Subsections:

	(A) Agency policy (030601) notes that “inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for no more than 24 hours while completing the assessment.” Agency policy further requires that “The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.” As noted by the John Lilley CC PCM, within the audit time frame, the John Lilley CC has not placed any (0) inmates who have alleged sexual abuse or who are at a high risk of sexual abuse in the involuntary segregated housing pending completion of their assessment. Reasoning & Findings Statement: The standard works to ensure that inmates reporting allegations of sexual abuse are not simply segregated as an automatic response for ensuring their physical safety. To this effect, the ODOC has policies in place prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been reached that there is no available alternative means of separation from likely abusers. Additionally, the ODOC has policies in place requiring that if an involuntary segregated housing assignment is made, the facility must review each inmate every 30 days to determine whether there is a continuing need for separation from the general population. Interviews with the John Lilley CC Warden and the John Lilley CC PCM did acknowledge that when no other alternatives existed, inmates would be placed in involuntary segregated housing. However, it was noted that the use involuntary segregated housing would be considered only as the last available option, and even at that, only as a temporary measure. During the audit time frame, the John Lilley CC did not place any (0) inmate alleging sexual abuse or sexual harassment within involuntary segregated housing. Also, in speaking with inmates who had filed previous allegations of sexual abuse and sexual harassment, none (0) stated that they had been placed in involuntary segregated housing as a consequence of their reports. As such, the John Lilley CC has satisfied the requirements of this standard.

115.71	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22 · ODOC OP-100202, Standards for Basic Peace Officer Training, 4-1-25 · ODOC, OP-140118, Emergency Medical Response, 3-10-22 · ODOC, OP-140125, Bloodborne Pathogen, 7-13-22 · ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum · ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24, 4-9-25 · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23 · ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24 · DOJ, A National Protocol for Sexual Assault Medical Forensic Examinations, 09/24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-12-24, 5-7-24, 5-20-24, 5-29-24, 7-30-24, 8-16-24, 9-9-24, 9-25-24, 1-12-25, 1-24-25, 1-27-25, 3-25-25, 4-8-25a, 4-8-25b, 4-22-25, 4-25-25, 5-6-25, 7-15-25a, 7-15-25b, 7-15-25c, 7-15-25d, 7-29-25a, 7-29-25b, 7-29-25c, 7-29-25d, 7-29-25e, 7-30-25a, 7-30-25b, 8-6-25, 8-11-25, 8-26-25a, 8-26-25b, 8-29-25, 9-10-25, 10-2-25, 10-6-25a, 10-6-25b, 10-6-25c, 10-16-25a, 10-16-25b, 10-16-25c, 10-16-25d, 10-29-25a, 10-29-25b, 11-20-25, 12-9-25, 12-10-25, 12-11-25a, 12-11-25b, 12-11-25c, 12-11-25d, 12-11-25e, 12-11-25f, 12-29-25, 2-18-26, 2-23-26,

3-23-26, 3-26-26, 4-22-26, 5-11-26, 6-4-26, 6-12-26

· JLCC Sexual Assault Report: 10-31-25, 12-19-25

Interviews:

· Agency PREA Coordinator

· JLCC Warden

· JLCC PREA Compliance Manager

· Investigative Staff

Site Review Observations:

· Reviewed investigator training certifications.

· Reviewed agency training records documenting investigator training curriculums.

· Review of investigative files.

Standard Subsections:

(A) Policy (040117) requires that when the agency conducts allegations of sexual abuse and sexual harassment in a prompt, thorough, and objective manner. As noted by Investigative Staff, this requirement also applies to third-party and anonymous reports.

(B) Policy (030601, 040117) requires investigators to have received specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. In interviewing JLCC Investigative Staff, said staff confirmed participation in numerous related courses, to include NIC’s Investigating Sexual Abuse in a Confinement Setting. As well, training curriculums, employee training certifications, as well as completed training rosters, provide additional documentation to support facility compliance.

	(C) Per policy (030601, 040117), Investigative Staff shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Policy (030601) allows that Investigative Staff will interview alleged victims, suspected perpetrators, and witnesses. Also, as noted by Investigative Staff, any other available information that might be relevant to the allegations, such as prior reports and complaints of sexual abuse involving the suspected perpetrator, would also be reviewed. Documentation review further confirms staff adherence to agency policy. (D) Per Investigative Staff, compel interviews would only be conducted after consulting with the prosecution to determine if compelled interviews may be problematic for subsequent judicial hearings, if deemed appropriate. During the audit time frame, investigators did not compel any (0) investigative interviews. As such, there wasn't any (0) documentation to review. (E) Per Investigative Staff, the credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and not based on that individual's status as a inmate or staff member. Policy (030601, 040117) further prohibits the use of a polygraph test or other truth-telling device as a condition of investigating allegations of sexual abuse or sexual harassment. Investigative Staff further confirm that the credibility of the interviewed subject is, in fact, determined on an individual basis considering the totality of the evidence presented. Documentation review further confirms staff adherence to agency policy. (F) Policy (030601, 040117) requires administrative investigations to consider whether staff actions or failures to act contributed to the sexual abuse and sexual harassment. All administrative investigations are documented in written reports. As a function on that documentation, these reports include a description of the physical evidence and testimonial evidence, the reasoning behind credibly assessments, as well as investigative facts and findings. JLCC Investigative Staff confirm that the credibility of the interviewed subject is, in fact, determined on an individual basis considering the totality of the evidence presented. Documentation review further confirms staff adherence to agency policy. (G) Policy (030601, 040117) requires that all criminal investigations are documented in written reports. As a function on that documentation, these reports include a description of the physical evidence, testimonial evidence, and documentary evidence. An interview with Investigative Staff supports the facility's adherence to this policy. Documentation review further confirms staff adherence to agency policy.

(H) As noted by the Investigative Staff, and required by policy (030601, 040117), all substantiated allegations of conduct that appear to be criminal in nature are referred for prosecution. During the audit time frame, the JLCC did not refer any (0) allegations of sexual abuse or sexual harassment for prosecution. Documentation review further confirms staff adherence to agency policy.

(I) Policy (040117) requires that all "all PREA investigations will be maintained as long as the alleged abuser is incarcerated and/or employed by the agency, plus five years." Investigative Staff confirm agency adherence to said policy.

(J) Per Investigative Staff, the departure of the alleged abuser or victim from the employment or control of either the facility or of the ODOC as whole, would not provide a basis for terminating an investigation. Documentation review further confirms staff adherence to agency policy.

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

(L) Per Investigative Staff, if an outside agency were to investigate any allegations of sexual abuse or sexual harassment within a facility, facility staff would both cooperate with these outside investigators and endeavor to remain informed about the progress of the investigation.

Reasoning & Findings Statement:

The Office of Inspector General (OIG) operates as the law enforcement branch inside of the ODOC, and by extension, the JLCC. As such, the ODOC conducts its own criminal and administrative investigations. To work as a criminal investigator within the agency, personnel must have law enforcement credentials. As well, to perform sexual abuse or sexual harassment investigations, ODOC staff must have met additional training requirements for conducting sexual abuse/sexual harassment investigations within a confinement setting. OIG staff do have the authority to investigate criminal and administrative cases within the JLCC, to include collecting evidence, as well as interviewing victims, suspected perpetrators, and witnesses. OIG investigators have been trained on the standards of evidence required to support a finding of guilt in criminal cases. As well, OIG investigators have been trained on due process and procedural requirements of criminal cases. As confirmed through interviews with OIG Investigative Staff, they work collaboratively with facility administration to facilitate communication between the two departments. Lastly, it is noted that all PREA investigations are referred to the OIG to determine if the

	allegations necessitate a criminal investigation and/or subsequent criminal prosecution. As such, the JLCC has clearly met the requirements of this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22 · ODOC DOJ, National Institute of Corrections (NIC), Investigating Sexual Abuse in a Confinement Setting, Course Curriculum · ODOC DOJ, National Institute of Corrections, Investigating Sexual Abuse in a Confinement Setting, Knowledge Review · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting, Certificate of Completion: 6-15-20, 3-10-22, 6-27-22, 6-15-23, 3-18-24, 9-11-24, 9-12-24 · ODOC NIC, PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, Certificate of Completion: 10-24-23 · ODOC Risk Management Institute, PREA Investigator Training for Allegations of Inmate Sexual Abuse, Certificate of Completion: 8-13-24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: · JLCC Warden · JLCC PREA Compliance Manager · Investigative Staff Site Review Observations:

	· Reviewed procedures for processing sexual abuse/sexual harassment allegations. · Reviewed investigative case file. Standard Subsections: (A) Policy (030601) clearly establishes the standard of proof required to substantiate claims of sexual abuse and sexual harassment. Policy (030601) requires that “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.” Specifically, per Investigative Staff, the allegations are determined substantiated, unsubstantiated, or unfounded based on the preponderance of the evidence. For substantiated claims, this simply means that the weight of the evidence must indicate that the allegations are more likely to be true than not true. A review of investigative files confirms staff adherence to policy. Reasoning & Findings Statement: Agency policy requires that Investigative Staff establish a standard of proof no higher than a preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated. When interviewed, Investigative Staff confirmed that standard of proof to be slightly more than half. As such, the JLCC has satisfied all material provisions for this standard.

115.73	**Reporting to inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22

	· ODOC, OP-140118, Emergency Medical Response, 3-10-22 · ODOC, Notification of Investigation Status, 12/21 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: · JLCC Warden · JLCC PREA Compliance Manager · Designated Staff Member Charged with Monitoring Retaliation · Investigative Staff Site Review Observations: · Reviewed procedures for processing sexual abuse and sexual harassment allegations. · Review of investigative case files. Standard Subsections: (A) Policy (030601) requires that “following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, the facility head shall inform the inmate victim at the conclusion of the investigation as to where the allegation has been determined to be substantiated, unsubstantiated, or unfounded.” Investigative Staff confirmed adherence to agency policy. (B) As noted by Investigative Staff, outside entities do not conduct investigations of sexual abuse or sexual harassment within the ODOC. However, in the event that such an investigation was to occur, Investigative Staff noted that the inmate would still be informed of the investigative outcome utilizing the agency’s Notification of Investigation Status Form.

(C) Policy (030601) requires that when an inmate has filed allegations of sexual abuse against a staff member (unless unfounded), the institutional investigator shall inform the inmate upon the following:

a. The staff member is no longer posted within the inmate's unit;

b. The staff member is no longer employed at the facility;

c. The institution learns that the staff member has been indicted on a charge related to sexual abuse within the institution;

d. The institution learns that the staff member has been convicted on a charge related to sexual abuse within the institution.

(D) Policy (030601) requires that when an inmate has filed allegations of sexual abuse against another inmate, the agency must notify the inmate whenever the alleged abuser has been "indicted or convicted on the sexual offense." Investigative Staff confirmed adherence to agency policy.

(E) Policy (030601) requires that "the facility head will ensure notifications to inmates." As well, as noted by the Facility warden, these notifications will be documented on the Notification of Investigative Status Form. During the audit time frame, the JLCC receive one (1) allegation of sexual abuse or sexual harassment. As the reporter was anonymous and a victim could not be determined, it was not possible to notify the unknown victim of the investigative outcome.

(F) Auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard works to ensure inmates are provided notification of final disposition to any allegations of sexual abuse and sexual harassment that have been reported to agency staff. ODOC policy requires these notifications to be documented. John Lilley CC and OIG investigative staff confirm their providing written notifications to inmates when their allegations are determined substantiated, unsubstantiated, or unfounded. Additionally, John Lilley CC investigative staff confirm having informed inmates who had filed substantiated sexual abuse and sexual harassment allegations against agency staff or other inmates upon a change in the housing status for the abusive inmate, a change in job status for the abusive employee, as well as the indictment or conviction of either person related to sexual abuse within the institution. During the audit time frame, the JLCC receive one (1) allegation of sexual abuse or sexual harassment. As the reporter was anonymous and a victim could not be determined, it

	was not possible to notify the unknown victim of the investigative outcome. Given interviews with staff and inmates, along with review of the notification process, it is determined that the John Lilley CC operates in accordance with all parts of this standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 Interviews: · JLCC Warden · JLCC PREA Compliance Manager · Investigative Staff · Oklahoma State Highway Patrol · Random Staff Site Review Observations:

· Review of staff disciplinary protocols for sexual abuse and sexual harassment determinations.

· Review of investigative case file.

Standard Subsections:

(A) Policy (030601) clearly advises that “sexual conduct between staff and inmates is strictly prohibited, subject to administrative disciplinary sanctions and referral for prosecution.” Interviews with the JLCC Warden and Investigative Staff confirm facility adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. Interviews with random staff reflect employee awareness to zero-tolerance policies for engaging in sexual abuse and sexual harassment of inmates.

(B) Policies (030601) clearly advises that “sexual conduct between staff and inmates is strictly prohibited, subject to administrative disciplinary sanctions and referral for prosecution.” In this, termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of a inmate. Within the audit time frame, there has not been any (0) employees who violated agency policy resigned prior to termination due to having engaged in an appropriate sexual relationship with inmates.

(C) Policies (030601) clearly advises that “sexual conduct between staff and inmates is strictly prohibited, subject to administrative disciplinary sanctions and referral for prosecution.” Interviews with the JLCC Warden and Investigative Staff confirm their adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. Within the audit time frame, there haven’t been any (0) employees assigned to the JLCC disciplined for violation of agency policy related to sexual abuse or sexual harassment.

(D) Policy (030601) notes that “all inmates or staff members found guilty of committing sexual assault are disciplined in accordance with agency procedures and will be referred for criminal prosecution by the Office of the Inspector General.” Within the audit time frame, the JLCC has not been required to report any (0) staff members to law enforcement for a violation of agency sexual abuse or sexual harassment policies.

	Reasoning & Findings Statement: This standard works to ensure staff who engage in sexual abuse and sexual harassment of inmates are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment policies. The ODOC has made the consequences of engaging in sexual abuse and sexual harassment of inmates exceptionally clear. During interviews with employees, contractors, volunteers, and inmates, all such persons were aware of the agency's zero-tolerance policy against sexual abuse and sexual harassment. During the audit time frame, there has not been any (0) employees of the John Lilley CC who has violated some aspects of the agency's sexual abuse or sexual harassment policies. This staff member was property referred for criminal prosecution by the Office of Inspector General. In total, the John Lilley CC has satisfied all requirements of this standard.

115.77	**Corrective action for contractors and volunteers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-040117, Investigations, 9-12-22 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Volunteer/Contractor Training Acknowledgement, Annual: 10-7-25, 10-8-25, 10-13-25, 10-14-25a, 10-14-25b, 10-15-25a, 10-15-25b, 10-16-25a, 10-16-25b, 10-16-25c, 10-22-25, 10-26-25, 10-27-25a, 10-27-25b, 10-27-25c, 10-27-25d, 10-28-25a, 10-28-25b, 10-28-25c, 10-28-25d, 10-28-25e, 10-28-25f, 10-29-25a, 10-29-25b, 10-30-25a, 10-30-25b, 10-30-25c, 10-30-25d, 10-31-25, 11-4-25, 11-7-25, 12-11-25, 12-30-25, 12-31-25

Interviews:

- Agency Contract Administrator
- JLCC Warden
- Investigative Staff
- Administrative (Human Resources) Staff
- Contractors Who May Have Contact with Inmates
- Volunteers Who May Have Contact with Inmates

Site Review Observations:

- Review contractor/volunteer files.
- Review of investigative case files.

Standard Subsections:

(A) Policy (030601) advises contractors and volunteers that rape and related sex crimes are “defined by law as a felony.” Interviews with contracted staff and volunteers evidenced that the agency’s zero-tolerance policy is institutionalized. A review of contractor/volunteer files and PREA training materials indicates that all such persons are aware of agency policy regarding the sexual abuse and sexual harassment of inmates. During the audit time frame, there have not been any (0) contractors or volunteers having been reported to law enforcement for engaging in sexual abuse of inmates.

(B) Policy (030601) notes that sexual conduct between employees, volunteers, and contract staff of the ODOC “is strictly prohibited, subject to administrative disciplinary sanctions and referral for prosecution.” Interviews with contracted staff and volunteers, as well as training curriculums for said persons, indicates that the consequences of engaging in sexual conduct with inmates is clearly understood.

	Reasoning & Findings Statement: This standard works to ensure contractors and volunteers who engage in sexual abuse and sexual harassment of inmates are reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The ODOC has made the consequences of engaging in sexual abuse and sexual harassment of inmates exceptionally clear. During interviews with employees, contractors, volunteers, and inmates, all such persons were aware of the agency's zero-tolerance policy against sexual abuse and sexual harassment. During the audit time frame, there have not been any (0) contractors or volunteers of the John Lilley CC who have violated the agency's sexual abuse or sexual harassment policies. Nonetheless, agency policy reflects the John Lilley CC would take appropriate action in prohibiting said contractors from further contact with inmates if found in violation of the agency's zero-tolerance against sexual abuse and sexual harassment policy. Accordingly, the John Lilley CC has satisfied all requirements of this standard.

115.78	**Disciplinary sanctions for inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC Sexual Misconduct and Harassment, OP-030601, Attachment A, 12/21 · ODOC, OP-060125, Disciplinary Procedures, 10-9-23 · ODOC, Inmates' Guide to Sexual Misconduct: How to Identify and Address Sexual Misconduct, 2021 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Inmate Orientation Manual, 2-17-26 · JLCC Zero Tolerance Acknowledgements for Inmates: 3-7-23, 11-16-23, 2-21-24, 5-21-24, 7-31-24, 9-11-24a, 9-11-24b, 9-11-24c, 11-13-24, 1-15-25a, 1-15-25b, 1-29-25, 6-11-25, 6-12-25, 7-11-25, 8-26-25, 9-3-25a, 9-3-25b, 9-10-25, 9-18-25a, 9-18-25b, 10-29-25a, 10-29-25b, 11-5-25a, 11-5-25b, 11-25-25, 12-3-25, 1-14-26a, 1-14-26b,

	1-14-26c, 1-14-26d, 1-21-26, 2-4-26a, 2-4-26b, 2-4-26c, 2-11-26a, 2-11-26b, 2-13-26, 2-18-26, 3-2-26, 3-6-26a, 3-6-26b, 3-6-26c, 3-11-26, 3-23-26, 3-25-26a, 3-25-26b, 3-26-26, 3-27-26, 4-1-26, 4-2-26, 4-3-26, 4-7-26a, 4-7-26b, 4-8-26a, 4-8-26b, 4-8-26c, 4-9-26a, 4-9-26b, 4-9-26c, 4-10-26, 4-13-26a, 4-13-26b, 4-13-26c, 4-13-26d, 4-16-26, 4-17-26, 4-28-26, 4-29-26, 5-20-26 · JLCC Zero Tolerance Acknowledgements for Inmates, Spanish: 8-4-26 Interviews: · JLCC Warden · JLCC PREA Compliance Manager · Investigative Staff · Medical Staff · Mental Health Staff · Random Staff · Random Inmates Site Review Observations: · Review of inmate disciplinary files. · Review investigative case files. Standard Subsections: (A) Policy (030601) notes that following a finding that a inmate engaged in inmate-on-inmate sexual abuse, said inmate will be “disciplined in accordance with agency procedures and will be referred for criminal prosecution by the Office of the Inspector General. During the audit time frame, the JLCC have not been any (0) findings of inmate-on-inmate sexual abuse.

(B) Policy (030601) ensures that disciplinary sanctions imposed are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. As well, sanctions consider aggravating and mitigating factors. Documentation review confirms staff adherence to agency policy.

(C) When determining a inmate's disciplinary sanctions, policy (030601) does consider how a inmate's mental disabilities or mental illness contributed to his behavior. Interviews with the JLCC Warden, as well as Risk Screening and Mental Health Staff, confirm that the mental state of inmates is given consideration during disciplinary proceedings.

(D) As noted by JLCC Mental Health staff, programming and/or interventions services are provided to inmates found to have engaged in sexual abuse.

(E) Per policy (030601), the agency may discipline an inmate for sexual contact and/or sexual conduct with staff only upon finding out that the staff member did not consent to such contact or conduct. An interview with the Facility warden confirms the facility's adherence to agency policy.

(F) Per policy (030601), a report made in good faith based upon a reasonable belief that the alleged conduct did occur does not constitute falsely reporting an incident or lying for the purpose of disciplinary action, even if the investigation does not establish evidence sufficient to substantiate the allegations. As noted by the Agency PREA Coordinator, this information is provided to inmates during each facility orientation. A review of inmate training documentation confirms the facility's adherence to said policy. Documentation review further confirms staff adherence to agency policy.

(G) Per policy (060125), the agency clearly distinguishes between consensual sex, which is still a violation of agency policy, and inmate-on-inmate sexual abuse.

Reasoning & Findings Statement:

The inmate disciplinary process is a formal means to address institutional misconduct. The JLCC uses a progressive disciplinary system, which allows for

	consideration of aggravating and mitigating factors. Within the audit time frame, the JLCC has not been required to process any (0) administrative findings of guilt regarding inmate-on-inmate sexual abuse that occurred at the facility. A review of documentation, as well as staff interviews, reflects that the mental health of an inmate is given serious consideration in sentencing and the availability of subsequent mental health services. In considering agency policies, facility procedures, staff interviews, and inmate comments, JLCC is compliant with disciplinary standards as required under this provision.

115.81	**Medical and mental health screenings; history of sexual abuse**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC #OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-140201, Mental Health Services Duties and Responsibilities, 3-10-26 · ODOC PREA Poster for Employees, English · ODOC OP-030601, Attachment A, Sexual Abuse & Sexual Harassment Training Booklet for New Hires · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC PREA Staff Training Acknowledgement: 3-26-24, 4-15-24, 5-27-24, 6-4-24, 9-25-24, 2-11-25, 3-11-25, 3-18-25, 5-6-25, 5-22-25, 2-9-26a, 2-9-26b, 2-9-26c, 2-9-26d, 2-9-26e, 2-9-26f, 2-9-26g, 2-9-26h, 2-9-26i, 2-24-26a, 2-24-26b, 2-24-26c, 2-24-26d, 2-24-26e, 2-24-26f, 2-24-26g, 2-24-26h, 2-24-26i, 2-24-26j, 2-24-26k, 3-3-26a, 3-3-26b, 3-3-26c, 3-9-26a, 3-9-26b, 3-23-26a, 3-23-26b, 3-26-26, 3-27-26, 4-6-26, 6-8-26, 6-11-26 · JLCC Screening for Risk of Sexual Victimization and Abusiveness, Initial Screening: 11-7-24, 1-8-25, 1-24-25, 6-11-25a, 6-11-25b, 6-16-25, 6-26-25, 6-27-25, 7-23-25, 8-21-25, 8-26-25, 9-3-25, 9-4-25, 9-10-25, 9-12-25, 9-26-25, 10-24-25, 10-27-25, 11-3-25a, 11-3-25b, 11-20-25, 12-2-25, 2-11-26, 2-13-26, 3-5-26, 3-6-26, 4-7-26,

4-9-26a, 4-9-26b, 4-17-26, 4-28-26, 4-29-26, 5-20-26

· JLCC Screening for Risk of Sexual Victimization and Abusiveness, Subsequent Screening:

10-29-24, 12-2-24, 2-10-25, 2-24-25, 6-18-25, 7-2-25, 7-10-25, 7-15-25,

7-25-25, 7-30-25, 8-19-25, 8-27-25, 9-3-25, 9-23-25a, 9-23-25b, 9-26-25, 9-29-25,

9-30-25, 10-10-25, 11-8-25, 11-17-25, 11-21-25, 11-24-25, 12-3-25, 1-5-26, 3-3-26a,

3-3-26b, 3-23-26, 3-27-26, 4-7-26, 4-22-26, 5-4-26a, 5-4-26b, 5-6-26, 5-7-26, 5-13-26,

6-3-26

· JLCC Screening for Risk of Sexual Victimization and Abusiveness, Annual Screening:

10-29-24, 7-9-25, 1-16-26, 2-12-26, 5-4-26, 5-27-26, 5-28-26a, 5-28-26b, 5-28-26c,

5-28-26d, 5-28-26e

Interviews:

- PREA Compliance Manager
- Intake Staff
- Investigative Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness

Site Review Observations:

- Observed Medical/Mental Health Departments and Risk Screening Areas.
- Review of Medical/Mental Health PREA Screening Forms.

	Standard Subsections: (A) Agency policy (79-ISA-04) requires that upon arrival, all John Lilley CC inmates will be screened for sexual abuse risk factors. “If the assessment indicates the IP is at risk or has experienced prior sexual victimization, whether it occurred in an institution setting or in the community, staff shall offer a follow-up meeting with a mental health practitioner within fourteen (14) calendar days of the intake screening” (79-ISA-04). Additionally, agency policy (67-MNH-02) allows that “any institutional employee can make a referral to Behavioral Health if they suspect an IP is currently being victimized through a human trafficking incident at their institution or if the IP discloses to the employee that they had been victimized through a human trafficking incident prior to their incarceration.” In speaking with the John Lilley CC PCM, it was noted that any staff member, contractor, or volunteer can make such a referral. Per the John Lilley CC PCM, within the audit time frame, 100% of inmates received at the John Lilley CC who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Conversations with medical and mental health staff confirmed the institutionalization of this practice. Interviews with inmates who reported previous sexual victimization at Intake generally confirmed that they were seen by mental health services either the same day as Intake or, at the latest, within the same week as Intake. Lastly, a review of John Lilley CC mental health referrals verifies that said recommendations are being made within agency policy. (B) Per policy (79-ISA-04), persons with a history of being sexually abusive must be referred for mental health services within 14 calendar days. In speaking with Mental Health staff, it is noted that the nature of the referral is in accordance with the individualized needs of each inmate. As noted by the John Lilley CC Operational Compliance Manager, within the audit time frame, 100% of inmates received at the John Lilley CC who had previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner. (C) Per policy (79-ISA-04), regular mental health referrals are addressed within a timeframe consistent with the nature of the referral and within 14 days of the intake screening. Review of PREA assessment documentation verifies John Lilley CC’s adherence to agency policy. (D) Per policy (79-ISA-02) and in accordance with the Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. 115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or

	local laws. As noted by medical and mental health staff during the interview process, medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. (E) Per policy (79-ISA-04) and in accordance with the Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. §115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local laws. As noted by medical and mental health staff during the interview process, medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18 years or considered a vulnerable adult. In speaking with medical and mental health staff, it was noted that staff do require informed consent prior to reporting incidents of prior sexual victimization that did not occur in an institutional setting for all persons except juveniles and individuals with developmental disabilities. Reasoning & Findings Statement: Within the audit time frame, 100% of inmates who had disclosed prior victimization during risk screening were offered a follow-up meeting with a medical or mental health practitioner. Within the audit time frame, 100% of inmates who had previously perpetrated sexual abuse as indicated during risk screening were offered a follow-up meeting with a medical or mental health practitioner. As noted by medical and mental health staff, the John Lilley CC is providing routine and regular medical screens and other health services in accordance with qualified medical assessments, as well as to policy. Documentation specific to the PREA Assessment Form for medical and mental health staff reflects the appropriate use of the screening tool to determine necessary housing and medical needs. Lastly, per agency, all inmates except juveniles and individuals with developmental disabilities, are required to provide informed consent prior to facility staff reporting information about prior sexual victimization that did not occur in an institutional setting. As such, the facility meets all provisions as established within this standard.

115.82	**Access to emergency medical and mental health services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents:

- ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21
- ODOC, OP-140118, Emergency Medical Response, 3-10-22
- ODOC, OP-140201, Mental Health Services Duties and Responsibilities, 3-10-26
- JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25

Interviews:

- JLCC PREA Compliance Manager
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of the Sac and Fox Nation
- Community-Based Victim Advocacy Staff
- Security Staff and/or Non-Security Staff Who Have Acted As First Responders
- Random Staff

Site Review Observations:

- Observed Medical Department
- Review of Medical/Mental Health Screening Form

Standard Subsections:

(A) In accordance with the policy (140118), “each facility will have an emergency area within their medical services” to provide emergency care as needed. Per Medical and Mental Health Staff, all inmates are provided emergency medical treatment and crisis intervention services, which the nature and scope of those services being determined according to their professional judgement, as well as within agency policy. It was further noted by medical and/or mental health staff, that if it was medically

	necessary, inmates would be transported to an outside hospital for examination and treatment as deemed medically appropriate. (B) Policy (140118) requires “each facility provides the availability of 24-hour emergency medical, dental, and mental health care.” In speaking with medical and mental health staff, 24-hour availability of qualified medical and mental health practitioners was affirmed. Lastly, during interviews with first responders, as well as random security staff, all personnel recognized with immediacy the need to notify medical staff of any sexual abuse allegations. (C) Policy (140118) requires that “while incarcerated, victims of sexual abuse will be offered timely information about and timely access to emergency contraceptives and sexually transmitted infections prophylaxis according to medical protocol, where medically appropriate.” In speaking with medical staff, adherence to this policy was confirmed. In speaking with SANE/SAFE personnel, it was further noted that all medical precautions, to include appropriate prophylactic information and treatment for sexually transmitted diseases, are given to victims of sexual abuse. (D) Policy (140118) notes that “treatment services will be provided to the victim without any co-pay and regardless of whether the victim names the abuser or cooperates with any investigation arising from the reported incident.” In speaking with medical staff, adherence to this policy was confirmed. Reasoning & Findings Statement: This standard is designed to provide inmates access to emergency medical and mental health services. In this, facility staff are meeting all the provisions within this standard. Policy allows that upon receipt of a inmate into the Medical Department, medical staff shall determine the inmate’s course of treatment; specifically, what is medically indicated based on evidence collection or physical trauma. During the audit time frame, there were any (0) allegations of sexual abuse. As such, no (0) inmates required the services of an outside hospital. In reviewing the totality of the information provided, as well as staff/inmate interviews, the JLCC has met the minimums provisions of this standard.

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

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-140118, Emergency Medical Response, 3-10-22 · ODOC, OP-140201, Mental Health Services Duties and Responsibilities, 3-10-26 · ODOC, MSRM 140118-01, Medical Service Resources Manual, 6-27-25 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: · JLCC PREA Compliance Manager · Medical Staff · Mental Health Staff Site Review Observations: · Observed Medical Department · Review of Medical and Mental Health PREA Screening Forms Standard Subsections: (A) Policy (030601) requires that “if the screening indicates an inmate has experienced or perpetrated prior sexual victimization, whether it occurred in an institutional setting or in the community setting, staff shall ensure the inmate is offered a follow-up meeting with a mental health provide within 14 days of the intake screening.” In speaking with risk screeners, medical, and mental health staff, adherence to this policy was confirmed. In speaking with correctional staff, there were no instances where any staff indicated that the medical or mental health departments

	had ever, or would ever, refuse to provide medical or mental health treatment to any inmate who claimed to have been a victim of sexual abuse. (B) Policy (030601) provides for continuing mental health services to inmates throughout their assignment to the JLCC. As noted by medical and mental health staff, even upon inmate release from the agency, continued care can be arranged. (C) As noted by both Medical and Mental Health staff, all 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. If not referred to an outside hospital emergency department, the inmate is treated in the facility infirmary after evaluation by a primary care provider. In each instance, as confirmed by medical and mental health staff, related services are provided in accordance with the judgement of qualified health care providers. The medical and mental health services provided are consistent with the community level of care. (D) JLCC is a male institution. As such, this provision does not apply. (E) JLCC is a male institution. As such, this provision does not apply. (F) Policy (140118) requires that “victims of sexual abuse will be offered timely information about and timely access to emergency contraceptives and sexually transmitted infections prophylaxis according to medical protocol, where medically appropriate.” In speaking with medical staff, it was noted that all inmates are provided medical services as appropriate for the nature of their concerns. Documentation review confirms staff compliance with agency policy. (G) Policy (140118) notes that “treatment services will be provided to the victim without any co-pay and regardless of whether the victim names the abuser or cooperates with any investigation arising from the reported incident.” In speaking with medical staff, adherence to this policy was confirmed. (H) Policy (030601) requires that “if an inmate is identified as a High Risk Sexual Predator (HRSP) or as a victim/potential victim at any time during his/her incarceration the inmate will be evaluated for appropriate housing and programs.” In speaking with mental health staff, it was noted that while agency policy allows for 60

	days to evaluate abusers, to help ensure the safekeeping of all inmates, any known abusers are generally evaluated at a much faster rate. Reasoning & Findings Statement: This standard is designed to ensure ongoing medical and mental health care for sexual abuse victims and abusers. The John Lilley CC offers qualified and coordinated medical and mental health care regardless of an inmate's ability to pay for said services. As appropriate, inmates are provided the opportunity to attend follow-up treatments, for both medical and mental health services. Once established, agency policy requires that access to said treatment follows the inmate throughout the ODOC system and can be coordinated with community care upon the inmate's release from the ODOC. The medical and mental health services provided are consistent with the community level of care. Additionally, because this level of care is coordinated to ensure that inmates receive every aspect of sexual abuse treatment, addressing both medical and mental health needs on a regular and timely basis, without regard to cost, the opportunity for treatment received in this institutional setting equals that of individuals receiving similar treatments within the community. Accordingly, the JLCC has met all the provisions within this standard.

115.86	**Sexual abuse incident reviews**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC, OP-030601, Sexual Abuse/Harassment Incident Review, 12/21 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Sexual Abuse/Harassment Incident Review: 12-29-25 Interviews: · Agency PREA Coordinator

· JLCC Warden

· JLCC PREA Compliance Manager

· Incident Review Team Member

Site Review Observations:

· Reviewed Incident Review Team procedures.

· Review Incident Review Team documentation.

Standard Subsections:

(A) Policy (030601) states that “in all instances where a sexual abuse investigation occurs, regardless of findings, at the conclusion of the investigation the facility shall conduct a sexual abuse incident review.” During the audit time frame, the JLCC has received one (1) sexual harassment allegation. Relevant documentation was reviewed. In speaking with the JLCC PREA Compliance Manager, the process of the Incident Review Team was explained in detail.

(B) Policy (030601) requires that sexual abuse incident reviews “shall occur within 30 days of the receipt by the facility or of OIG investigative findings.” During the audit time frame, the JLCC has received one (1) sexual harassment allegation. Relevant documentation was reviewed. In speaking with the JLCC PREA Compliance Manager, the process of the Incident Review Team was explained in detail.

(C) Policy (030601) requires that “the review team shall include administrative staff, with input from line supervisors, investigators, medical/mental health professional and facility PREA Compliance Manager.” During the audit time frame, the JLCC has received one (1) sexual harassment allegation. Relevant documentation was reviewed. In speaking with the JLCC PREA Compliance Manager, the process of the Incident Review Team was explained in detail.

(D) Policy (030601) requires that the sexual abuse incident review team considers:

a. Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;

	b. This subsection is no longer applicable to compliance findings. c. Examine whether the area in the facility where the incident allegedly occurred contains physical barriers in the area may enable abuse; d. The adequacy of staffing levels in that area during different shifts; e. Whether monitoring technology should be deployed or augmented to supplement supervision by staff. f. Following consideration, the sexual abuse incident review team will prepare a report of the review team's findings. (E) Upon completion of the incident review report, the facility "shall implement the recommendations for improvement or shall document the reasons for not doing so." During the audit time frame, the JLCC has received one (1) sexual harassment allegation. Relevant documentation was reviewed. In speaking with the JLCC PREA Compliance Manager, the process of the Incident Review Team was explained in detail. Reasoning & Findings Statement: During the audit time frame, the JLCC has received one (1) sexual harassment allegation. In excess of standard requirements, upon conclusion of the sexual harassment allegation, an Incident Review Team was conducted. In speaking with the JLCC PREA Compliance Manager, as well as the Agency PREA Coordinator, each person explained their role within the incident review process. After relevant discussion, it is evident that the facility has procedures in place to engage incident reviews and that staff are knowledge in their obligations to the team. Accordingly, JLCC has exceeded the requirements of this standard.

115.87	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21

· ODOC Bridgeway MOU Amendment, 1-22-24

· JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25

Interviews:

· Agency PREA Coordinator

· JLCC Warden

· JLCC PREA Compliance Manager

Site Review Observations:

· Extensive review of agency website/PREA section

· Reviewed all PREA Outcome Measures contained within the agency website.

Standard Subsections:

(A) Policy (030601) provides all staff within the JLCC a standardized set of definitions specific to sexual abuse/sexual harassment allegations. In speaking with the JLCC Investigative Staff, adherence to the use of these definitions was confirmed.

(B) Policy (030601) further requires that “the agency shall aggregate the incident-based sexual abuse data at least annually.” The JLCC PREA Coordinator confirmed the facility’s overall adherence to this policy. As well, an interview with the Agency PREA Coordinator confirms the agency’s adherence to this provision.

(C) Per policy (030601), “incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.” The JLCC PREA Coordinator confirmed the facility’s overall adherence to this policy. As well, an interview with the Agency PREA Coordinator confirms the agency’s adherence to this provision.

	(D) Policy (030601) requires that “the agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.” The JLCC PREA Coordinator confirmed the facility’s overall adherence to this policy. As well, an interview with the Agency PREA Coordinator confirms the agency’s adherence to this provision. (E) Policy (030601) mandates that “the agency shall also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.” The JLCC PREA Coordinator confirmed the facility’s overall adherence to this policy. As well, an interview with the Agency PREA Coordinator confirms the agency’s adherence to this provision. A review of the agency’s website finds institutional information readily available: https://oklahoma.gov/doc/prison-rape-elimination-act.html (F) Policy (030601) requires that “upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.” An interview with the Agency PREA Coordinator confirms the agency’s adherence to this provision. Reasoning & Findings Statement: This standard works to ensure that specific data relative to promoting sexual safety within a correctional institution is collected on a monthly basis. That data is then aggregated and made available for public review. The JLCC has complied with the timely collection of said data and subsequently furnishes it to appropriate entities as required. Hence, the JLCC has met all provisional requirements and is in compliance with this standard.

115.88	**Data review for corrective action**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21

	· ODOC Bridgeway MOU Amendment, 1-22-24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 Interviews: · Agency Head · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager Site Review Observations: · Extensive review of agency website/PREA section · Reviewed all PREA Outcome Measures contained within the agency website. Standard Subsections: (A) Policy (030601) requires “the Office of the Inspector General shall collect accurate, uniform data for every allegation of sexual abuse at facilities using a standardized instrument and set of definitions.” Following which, the ODOC then uses that data to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. Specifically, the ODOC works to identify problem areas, take corrective action on an ongoing basis, and prepares an annual report of its findings from the data review and any corrective actions for each facility, as well as the agency as a whole. The PREA Coordinator confirmed adherence to this policy. As well, the ODOC Annual Report of Sexual Violence for ODOC for years 2020, 2021, 2022, and 2023 does reflect the intelligent use of said data. (B) Policy (030601) requires that annual statistical reports include a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of the ODOC’s progress in addressing sexual abuse and sexual harassment. The Agency PREA Coordinator confirms adherence to this policy. As well, the JLCC Annual Internal Report on Sexual Assault Data for years 2020, 2021,

	2022, and 2023 does reflect a comparative analysis across years. (C) Policy (030601) requires that upon completion of each year's annual report, it "will be approved by the agency director and made available on the agency website and updated annually." A review of the ODOC website indicates that upon approval from the agency director, the report is then made available to the public on the agency website. The PREA Coordinator confirms adherence to this policy. Furthermore, a review of the ODOC website finds all agency PREA reports publicly available: https://oklahoma.gov/doc/prison-rape-elimination-act.html (D) Policy (030601) requires that "individually identifying information will be redacted." In speaking with the Agency PREA Coordinator, it was noted that should the agency need to redact specific information other than publicly identifying statistics, proper procedural restraints would be applied. Reasoning & Findings Statement: This standard works to determine if agency, and by extension, facility base staff use aggregated data to promote the overall safety and security of the facility. In speaking with the Agency PREA Coordinator and the JLCC Warden, the manner in which person utilized the data to improve overall institutional safety, based on their role within the agency, was explained. Hence, the JLCC has demonstrated clear compliance with each of the provisions, and as such, has reached the goal of the standard.

115.89	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · ODOC Bridgeway MOU Amendment, 1-22-24 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25

	Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager Site Review Observations: · Extensive review of agency website/PREA section Standard Subsections: (A) Policy (030601) requires all aggregated data to be securely retained for “at least ten years after the date of the initial collection unless Federal, State, or local law requires otherwise.” The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87. (B) Policy (030601) requires all aggregated data to be securely retained for “at least ten years after the date of the initial collection unless Federal, State, or local law requires otherwise.” The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87. This data is made readily available to the public through the ODOC website. (C) Policy (030601) requires that “individually identifying information will be redacted.” The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87. (D) Policy (030601) requires all aggregated data to be securely retained for “at least ten years after the date of the initial collection unless Federal, State, or local law requires otherwise.” The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual

	aggregated reports previously published pursuant to §115.87. This data is made readily available to the public through the ODOC website. Reasoning & Findings Statement: This standard works to ensure both public availability and agency integrity in the presentation of aggregated sexual abuse data. In reviewing agency documents and speaking with staff, it is more than apparent that both the JLCC Warden, as well as the Agency PREA Coordinator, operate with transparency in government. As such, the facility has clearly obtained each provision, and thus, satisfactorily achieve overall compliance.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Audit Notice, English · JLCC Audit Notice, Spanish Interviews: · Agency PREA Coordinator · JLCC Warden · JLCC PREA Compliance Manager · Random/Targeted Staff · Random/Targeted Inmates

	Site Review Observations: · Onsite inspection of the entire JLCC · Review of documentation available via the JLCC PREA website Standard Subsections: (A) As evidenced by presence of facility audits on the ODOC website, and confirmed by the Agency PREA Coordinator, PREA audits have been completed at all ODOC correctional facilities to provide for at least one-third of each facility type operated by the agency being audited during each audit year. (B) This is Audit Year 1 of Cycle 5. (H) The auditor had full access to all areas of the facility. (A) All documents requested by the auditor were received in a timely manner. (A) The auditor was permitted to conduct private interviews with inmates. (B) Inmates were permitted to correspond with the auditor using privileged mail processes. Reasoning & Findings Statement: Both the PREA Coordinator and the JLCC Warden were exceptionally prepared for this review. The auditor was provided the PAQ well in advance of arriving to the facility. The auditor was given unrestricted access to the institution and provided with all reference materials requested. The auditor was provided with a convenient location from which to interview both employees and staff in a confidential manner. Agency staff ensured that the flow of interview traffic was never restricted and that the auditor was able to attend all requested inmate functions throughout the facility as needed. The auditor did not experience any significant barriers, at any stage of

	the audit, that were under the control of either the agency or the JLCC. Accordingly, JLCC has exceeded the provisions of this standard.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: · ODOC, OP-030601, Oklahoma Prison Rape Elimination Act, 12-1-21 · JLCC #030601-01, PREA Coordinated Response Plan, 10-1-25 · JLCC Audit Notice, English · JLCC Audit Notice, Spanish Interviews: · Agency PREA Coordinator Site Review Observations: · Review of documentation available via the ODOC PREA website Standard Subsections: (a) A review of the agency website reflects that the ODOC has published all final audit reports for prior audits completed during the last three years preceding this audit. The PREA Coordinator affirms that all facilities within the ODOC have been audited, and their reports subsequently published, on the agency’s website. Reasoning & Findings Statement:

	The function of this standard is to promote transparency in government by ensuring that all facility audits are available for public review, by way of, for example, the agency’s website. In this case, the JLCC does have an agency website and has made all facility PREA reports conveniently accessible to the public.

115.11 (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
115.11 (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
115.11 (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.)	yes
	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.)	yes
115.12 (a)	**Contracting with other entities for the confinement of inmates**	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to 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 inmates.)	yes
115.12 (b)	**Contracting with other entities for the confinement of inmates**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	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 inmates.)	
115.13 (a)	**Supervision and monitoring**	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	**Supervision and monitoring**	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	**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: 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
115.13 (d)	**Supervision and monitoring**	
	Has the facility/agency 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?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency 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?	yes

115.14 (a)	**Youthful inmates**	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	**Youthful inmates**	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	**Youthful inmates**	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (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
115.15 (b)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	**Limits to cross-gender viewing and searches**	
	Does the facility have policies that enables inmates 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 have procedures that enables inmates 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 an inmate housing unit?	yes
115.15 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.16 (a)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency take appropriate steps to ensure that inmates 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: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates 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: inmates who are blind or have low vision?	yes

	Does the agency take appropriate steps to ensure that inmates 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: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates 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: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates 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: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates 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 inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates 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 inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	**Inmates with disabilities and inmates 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 inmates 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
115.16 (c)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates 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 inmates 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 inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates 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 inmates 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	yes

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, 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
115.17 (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 inmates?	yes
115.17 (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 inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	**Hiring and promotion decisions**	
	Does the agency ask all applicants and employees who may have contact with inmates 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	yes

	contact with inmates 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?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (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
115.17 (h)	**Hiring and promotion decisions**	
	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
115.18 (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 inmates 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
115.18 (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 inmates 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
115.21 (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	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	**Evidence protocol and forensic medical examinations**	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (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? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes

	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (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
115.21 (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 agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (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? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (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
	Does the agency have a policy and practice 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
115.22 (c)	**Policies to ensure referrals of allegations for investigations**	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	**Employee training**	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates 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 inmates on inmates’ right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates 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 inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with	yes

	inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	
115.31 (b)	**Employee training**	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	**Employee training**	
	Have all current employees who may have contact with inmates 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
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with inmates 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 inmates)?	yes
115.32 (c)	**Volunteer and contractor training**	

	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	**Inmate education**	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	**Inmate education**	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	**Inmate education**	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	**Inmate education**	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes

	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	**Inmate education**	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	**Inmate education**	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	**Specialized training: Investigations**	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	**Specialized training: Investigations**	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (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 115.21(a).)	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 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 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
	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
115.35 (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	yes

	health care practitioners who work regularly in its facilities.)	
115.35 (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 §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (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
115.41 (a)	**Screening for risk of victimization and abusiveness**	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	**Screening for risk of victimization and abusiveness**	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	**Screening for risk of victimization and abusiveness**	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	**Screening for risk of victimization and abusiveness**	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	**Screening for risk of victimization and abusiveness**	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	**Screening for risk of victimization and abusiveness**	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate’s risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate’s risk level when warranted due to a request?	yes
	Does the facility reassess an inmate’s risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate’s risk level when warranted due to receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness?	yes
115.41 (h)	**Screening for risk of victimization and abusiveness**	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	**Screening for risk of victimization and abusiveness**	
	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 inmate’s detriment by staff or other inmates?	yes
115.42 (a)	**Use of screening information**	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Education Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	**Use of screening information**	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.43 (a)	**Protective Custody**	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	**Protective Custody**	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	**Protective Custody**	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	**Protective Custody**	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility’s concern for the inmate’s safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
115.43 (e)	**Protective Custody**	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	**Inmate reporting**	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	**Inmate reporting**	
	Does the agency also provide at least one way for inmates 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 inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	**Inmate reporting**	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	**Exhaustion of administrative remedies**	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	**Exhaustion of administrative remedies**	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate 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.)	yes
115.52 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (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 inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	does the agency notify the inmate 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.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates 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 inmates? (If a third party files such a request on behalf of an inmate, 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 inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate 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 an inmate 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?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency’s determination whether the inmate 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
115.52 (g)	**Exhaustion of administrative remedies**	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	**Inmate access to outside confidential support services**	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates 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? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	**Inmate access to outside confidential support services**	
	Does the facility inform inmates, 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
115.53 (c)	**Inmate access to outside confidential support services**	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (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 an inmate?	yes
115.61 (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 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 regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	**Staff and agency reporting duties**	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	**Staff and agency reporting duties**	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
115.61 (d)	**Staff and agency reporting duties**	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	**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
115.62 (a)	**Agency protection duties**	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	**Reporting to other confinement facilities**	
	Upon receiving an allegation that an inmate 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
115.63 (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
115.63 (c)	**Reporting to other confinement facilities**	
	Does the agency document that it has provided such notification?	yes
115.63 (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
115.64 (a)	**Staff first responder duties**	
	Upon learning of an allegation that an inmate 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 an inmate was sexually abused, is the first security staff member to respond to the report	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate 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 an inmate 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
115.64 (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
115.65 (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
	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 limit the agency’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (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 inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates 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 inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates 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 inmate 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 inmate 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 inmate 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
115.67 (d)	**Agency protection against retaliation**	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (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
115.68 (a)	**Post-allegation protective custody**	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (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/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (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 as required by 115.34?	yes
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	**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
115.71 (e)	**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 inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	**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
115.71 (g)	**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
115.71 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	**Criminal and administrative agency investigations**	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	**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 agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	**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 115.21(a).)	yes
	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
115.73 (a)	**Reporting to inmates**	
	Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	**Reporting to inmates**	
	If the agency did not conduct the investigation into an inmate’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 inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	**Reporting to inmates**	
	Following an inmate’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 inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate’s unit?	yes
	Following an inmate’s allegation that a staff member has	yes

	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?	
	Following an inmate'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 an inmate'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
	Following an inmate's allegation that he or she has been sexually abused by another inmate, 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 an inmate's allegation that he or she has been sexually abused by another inmate, 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
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (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
115.76 (b)	**Disciplinary sanctions for staff**	
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
	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
115.76 (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
115.77 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	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
115.77 (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 inmates?	yes
115.78 (a)	**Disciplinary sanctions for inmates**	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	**Disciplinary sanctions for inmates**	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	**Disciplinary sanctions for inmates**	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	**Disciplinary sanctions for inmates**	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	**Disciplinary sanctions for inmates**	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	**Disciplinary sanctions for inmates**	
	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
115.78 (g)	**Disciplinary sanctions for inmates**	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes

	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	**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
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	**Access to emergency medical and mental health services**	
	Do inmate 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
115.82 (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 security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

	Are inmate 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
115.82 (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
115.83 (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 inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (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
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph §	na

	115.83(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. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.83 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (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
115.83 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (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
115.86 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (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
115.86 (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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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 §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	**Sexual abuse incident reviews**	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (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
115.87 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (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
115.87 (d)	**Data collection**	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports,	yes

	investigation files, and sexual abuse incident reviews?	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (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
115.88 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.87 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 § 115.87 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 § 115.87 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
115.88 (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
	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
	Does the agency indicate the nature of the material redacted	yes

	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?	
115.89 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (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
115.89 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 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.)	yes
	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	na

	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.)	
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 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