

PREA Facility Audit Report: Final

Name of Facility: Marin County Jail
Facility Type: Prison / Jail
Date Interim Report Submitted: 09/15/2024
Date Final Report Submitted: 03/26/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Eric Woodford	Date of Signature: 03/26/2025

AUDITOR INFORMATION	
Auditor name:	Woodford, Eric
Email:	eiw@comcast.net
Start Date of On-Site Audit:	07/29/2024
End Date of On-Site Audit:	08/01/2024

FACILITY INFORMATION	
Facility name:	Marin County Jail
Facility physical address:	13 Peter Behr Drive, San Rafael, California - 94903
Facility mailing address:	

Primary Contact

Name:	Brennan Collins
Email Address:	b_collins@marinsheriff.org
Telephone Number:	4154737556

Warden/Jail Administrator/Sheriff/Director	
Name:	Brennan Collins
Email Address:	b_collins@marinsheriff.org
Telephone Number:	4154792311

Facility PREA Compliance Manager	
Name:	Donna Brickell
Email Address:	d_brickell@marinsheriff.org
Telephone Number:	(415) 473-5194

Facility Health Service Administrator On-site	
Name:	Aleksei Rajamachvili
Email Address:	arajamachvili@marincounty.org
Telephone Number:	415-473-3614

Facility Characteristics	
Designed facility capacity:	385
Current population of facility:	242
Average daily population for the past 12 months:	251
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both womens/girls and mens/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-73
Facility security levels/inmate custody levels:	Type II/pre-sentence & sentenced
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	116
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:	258

AGENCY INFORMATION	
Name of agency:	Marin County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	1600 Los Gamos Dr. #200, San Rafael, California - 94903
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Brian Fay	Email Address:	b_fay@marinsheriff.org

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>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.</p> <p>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.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-07-29
2. End date of the onsite portion of the audit:	2024-08-01

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	On 6/28/24, the auditor reached out to the Senior Operations Officer for Just Detention International requesting the Agency review their database to determine if they have recieved any information related to PREA violations from the IPs or staff at the Marin County Detention Facility in California over the past 12 months. The agency responded that review of their database shows that over the past 12 months they have not recieved any information regarding the Marin County Detention facility over the past 12 months.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	385
15. Average daily population for the past 12 months:	251
16. Number of inmate/resident/detainee housing units:	7

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	253
19. 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:	48
20. 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:	21
21. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
22. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0

23. 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:	7
24. 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:	4
25. 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:	0
26. 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:	15
27. 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:	3
28. 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

29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	<p>On first day of audit, agency indicated there were no transgender or intersex IPs housed at the Marin County Jail.</p> <p>On first day of audit agency indicated there were no IPs placed in segregated housing/ isolation for risk of sexual victimization in the facility as of the first ay of the onsite portion of the audit.</p> <p>On first day of audit agency indicated there were no blind or visually impaired IPs on first day of the onsite portion of the audit.</p> <p>On first day of the audit agency indicated there were no deaf or hard of hearing IPs on the firs day of the onsite portion of the audit.</p>
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
30. 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:	36
31. 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:	3
32. 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:	6
33. 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:	No additional information to provide.15

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:

15

35. 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

36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?

Selected by race, ethnicity, length of time in facility, housing assignment and gender

37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?

- ☒ Yes
- ☐ No

38. 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):

Auditor oversampled the female IP population as there was only one female housing unit available for the Marin County Jail.

Targeted Inmate/Resident/Detainee Interviews

39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:

8

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".

40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:

1

41. 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:

0

41. 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.

41. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>Agency indicated no youthful offenders housed at institutions.</p> <p>Agency indicated no IPs with cognitive disabilities housed at the facility.</p>
42. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	<p>1</p>
43. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	<p>1</p>
44. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	<p>1</p>
45. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>2</p>
46. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>1</p>
47. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	<p>0</p>

47. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input checked="" type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
48. 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:	2
49. 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
49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
49. 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).	Agency reports there were no IPs who fit this category in Segregated Housing.

50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Agency indicated that no transgender or intersex IPs housed at the facility during the onsite audit. The IP who reported sexual abuse in this facility declined to be interviewed during the onsite audit.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
51. Enter the total number of RANDOM STAFF who were interviewed:	7
52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<div> <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </div>
53. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<div> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>
54. 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 additional comments provided
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.	

55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	28
56. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
58. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
59. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	IT staff IP Mail Staff Training Staff Grievance Response staff
61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Enter the total number of VOLUNTEERS who were interviewed:	1
61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
62. Enter the total number of CONTRACTORS who were interviewed:	3

<p>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input checked="" type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>63. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>IT Staff IP Mail Staff Training staff Grievance Response Staff Kitchen Staff IP Hearing/disciplinary Staff Volunteer Coordinator Maintenance Staff</p>
<p>SITE REVIEW AND DOCUMENTATION SAMPLING</p>	
<p>Site Review</p>	
<p>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.</p>	
<p>64. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

65. 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

66. 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

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

☒ Yes
☐ No

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

☒ Yes
☐ No

69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

No additional comments included

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.

70. 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

71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	<p>Auditor randomly selected 24 IPs for documentation to include signed PREA Incarcerated Person Education form to verify Initial, comprehensive Education, screening date, admission date and 30-day Reassessment.</p> <p>Auditor randomly selected 23 custody staff, 3 contractors and 10 Volunteers for documentation to include Hire date, Criminal background dates, 3 required questions, prior institution employers and signed PREA Compliance verification forms.</p> <p>Auditor randomly selected 23 custody staff, 3 contractors and 10 volunteers for documentation to include signed PREA Training Documentation forms for staff, signed PREA overview for contractors and volunteers and emergency contact forms for volunteers.</p>
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
<p>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.</p>	

72. 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	1	X	1	x
Staff-on-inmate sexual abuse	1	X	1	x
Total	2	X	2	x

72. Explain why this information could not be provided.

No inmate on inmate sexual abuse or Staff on Inmate sexual abuse criminal investigation.
No allegations that had both criminal and administrative investigations.

73. 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	2	x	2	x
Staff-on-inmate sexual harassment	3	x	3	x
Total	5	x	5	x

73. Explain why this information could not be provided.

No inmate on inmate sexual abuse or Staff on Inmate sexual abuse criminal investigation.
No allegations that had both criminal and administrative investigations.

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.

74. 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	x	x	x	x	x
Staff-on-inmate sexual abuse	x	x	x	x	x
Total	x	x	x	x	x

74. Explain why this information could not be provided.

No ongoing investigations
 No ongoing inmate on inmate sexual abuse cases
 No sexual abuse allegations referred for prosecution
 No convicted/adjudicated sexual abuse allegation cases
 No acquitted cases

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	x	1	x	x
Staff-on-inmate sexual abuse	x	1	x	x
Total	x	2	x	x

75. Explain why this information could not be provided.	No ongoing sexual abuse investigations No ongoing staff on inmate sexual abuse investigations No unsubstantiated inmate on inmate sexual abuse investigations No unsubstantiated staff on inmate sexual abuse investigations No substantiated inmate on inmate sexual abuse investigation No substantiated staff on inmate sexual abuse investigations.
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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.

76. 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	x	x	x	x	x
Staff-on-inmate sexual harassment	x	x	x	x	x
Total	x	x	x	x	x

76. Explain why this information could not be provided.	No ongoing criminal inmate on inmate sexual harassment investigations No criminal sexual harassment allegations referred for prosecution No criminal indicted/court Case Filed No criminal convicted/adjudicated sexual harassment allegation cases No criminal acquitted sexual harassment cases
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77. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	x	2	x	x
Staff-on-inmate sexual harassment	x	3	x	x
Total	x	5	x	x

77. Explain why this information could not be provided.

No ongoing inmate on inmate administrative sexual harassment investigations
 No unsubstantiated inmate on inmate administrative sexual harassment investigations
 No substantiated inmate on inmate administrative sexual harassment investigations
 No ongoing staff on inmate administrative sexual harassment investigations
 No unsubstantiated staff on inmate administrative sexual harassment investigations
 No substantiated staff on inmate administrative sexual harassment investigations

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

78. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:

7

79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	5
87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

3

92. 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)

93. 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)

94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

95. 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

96. 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

97. 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

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> 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
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11(a): Policy 606.1 PURPOSE AND SCOPE mandates that "This policy provides guidance for compliance with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect, and respond to sexual abuse and sexual harassment (28 CFR 115.11; 15 CCR 1029). All incidents of inmate sexual abuse that occur in the Main County Jail shall be investigated, documented, and reported in accordance with the mandates set forth by PREA and the Department of Justice National PREA Standards.</p> <p>Policy Section 606.2 discusses Zero Tolerance. Definitions related to this policy are identified in Section 606.1.1 Definitions, Sanctions are identified in Section 606.11 Sexual abuse and Sexual Harassment Between Staff and Incarcerated Persons. Descriptions of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates is outlined in Section 606.4 PREA Coordinator on pages 3,4 & 5.</p> <p>Policy 314 Discriminatory Harassment mandates that the purpose of this policy is to prevent department members from being subjected to discrimination or harassment, including sexual harassment, and retaliation. Nothing in this policy is intended to</p>

create a legal or employment right or duty that is not created by law.

115.11(b): PREA policy 606 pg 3 Section 606.4 mandates that "The Captain shall appoint a Sheriff's Lieutenant to develop, implement, and oversee department efforts to comply with the PREA standards. The PREA coordinator shall review facility policies and practices, and make appropriate compliance recommendations to the Captain." Interview with the PREA Coordinator indicates that he feels that he has enough time to manage all the PREA related responsibilities. He oversees one PREA Compliance Manager and they interact on a continual bases with regards to PREA issues. Should the PREA Coordinator identify issues with complying with a PREA Standard, he works towards compliance by obtaining information from the PREA Resource Center for guidance and working with the auditor for a plan to guide us towards compliance. Agency provided an Organizational chart which failed to include a PREA Coordinator at the "upper level, agency-wide position." Agency to provide auditor with the Agency Organizational chart which designates the PREA Coordinator position at the upper level Agency-wide position.

115.11(c): The PREA Standard provision mandates that "Where an agency operates more that one facility, each facility shall designate a PREA Compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards in all of it's facilities." Agency has only one facility. The Administrative Lieutenant is the PREA Compliance Manager for the facility

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.11(b), and corrective action is required.

Corrective Action Recommended:

115.11(b): Position of the PREA Coordinator in the agency's organizational structure is mandated by this Standard provision.

Agency provided an Organizational chart which failed to include a PREA Coordinator at the "upper level, agency-wide position.

1. Agency to provide auditor with the Agency Organizational chart which designates the PREA Coordinator position at the upper level Agency-wide position.

Corrective Action Completion 8/13/24:

115.11(b): RESPONSE: 8/13/24 Agency amended the Lt. Staff Assignment Inter Office Memorandum from the Undersheriff to All Personnel. Memorandum switched Lieutenants for the PREA Coordinator positions. The PREA Coordinator position remains in the upper level, Agency-Wide position within the 3rd level of the Sheriff. Agency also amended and uploaded the Sheriff's Organizational Chart.

	The agency/facility has met the requirements of Standard provision(s) 115.11(b) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.11.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12(a): N/A - PAQ indicates that Marin County Sheriff's Department does not contract with private agencies or other entities for confinement of Incarcerated Persons (IPs).</p> <p>115.12(b): N/A - PAQ indicates that Marin County Sheriff's Department does not contract with private agencies or other entities for confinement of Incarcerated Persons (IPs). No contracts for confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Interview with Agency Contract Administrator indicates that should the Agency contract for the confinement of IPs, files and data would be securely maintained to ensure all PREA requirements have been met. Agency currently do not contract for the confinement of IPs.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.12.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.13(a): The agency requires the facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse.</p> <p>Agency reports that since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates is 224. The average daily number of inmates on which the staffing plan was predicated is 249.</p>

Agency provided auditor with copy of the 2024 Staffing Plan and 2024 Jail Custody Statistics 2024.

Staffing Plan 2024 identifies hallway blindspots where staff or IPs may be isolated which are planned to be corrected through an updated security/camera system which is currently in process.

Agency plans to add several cameras to housing units to assist deputies with direct supervision of the units and exercise yards.

Here are 4 areas that are not completely identified in the Staffing Plan as required in Standard provisions 115.13:

1. Agency to provide auditor with documentation which specifically verifies completion of the security/camera system for hallway blindspots.
2. Agency to provide auditor with documentation which verifies camera updates in specific housing units and exercise yards.
3. Agency to document the specific composition of the IP population within the Facility.
4. Agency to identify institutional programs which occurs on each specific shift.

Interview with Facility Commander or Designee indicates that Marin County Jail has a stand-alone facility that has a documented staffing plan which provide staffing levels to protect IPs against sexual abuse. Video monitoring is discussed in the plan which is maintained in the Policy Procedure Manual. When assessing adequate staffing levels and the need for video monitoring, the staffing plan considers all 11 factors identified and mandated in Standard provision 115.13, to include Title 15 & Title 24. Agency is audited by California Board of State and Community Corrections to pass certification. Compliance with the Staffing Plan is reviewed annually

Interview with PREA Compliance Manager indicates that When assessing adequate staffing levels and the need for video monitoring, the staffing plan considers all 11 factors identified and mandated in Standard provision 115.13.

115.13(b): N/A - Agency reports no deviations from the Staffing Plan. Agency indicates no deviation from the Staffing Plan over the past 12 months. Interview with Facility Commander or Designee indicates that the facility documents all instances of non-compliance with the staffing plan through the scheduling Coordinator which would provide explanations for non-compliance.

115.13(c): Agency reports that a Staffing Plan reviews are created annually in collaboration with the PREA Coordinator to review the staffing plan to see whether adjustments are needed to:

- (a) the staffing plan,
- (b) the deployment of monitoring technology, or
- (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

Interview with the PREA Coordinator indicates he is consulted regarding any staffing plan assessments of or adjustments to, the staffing plan for this facility every 6

months.

Agency's last PREA Audit occurred in 3/19/2021 when a Staffing Plan was documented. The PREA Standard 115.13(c) requires a Staffing Plan review annually for each facility. Agency failed to provide annual Staffing Plan reviews for years 2022 & 2023. Agency instead provided the 5/14/2024 Staffing Plan.

Agency to provide auditor with Staffing Plan reviews for year 2022 & 2023 where the reviews assess,, determine, and document whether adjustments are needed to:

- 1). Establish an updated staffing plan for both years 2022 & 2023
- 2). Discussion of facility's deployment of video monitoring systems and other monitoring technologies
- 3). Resources the facility has available to commit to ensure adherence to the staffing plan

115.13(d): PAQ reports that each shift Sergeant checks each housing unit on their shift. All these are unannounced and random by the Sergeants. The deputy logs them in each housing unit beat books. Each shift sergeant is responsible for conducting these visits once per shift. These checks are always random, and the housing unit deputies are not told where the Sergeant is going next or when he/she is going there.

Interview with two Intermediate- or Higher-Level Facility Staff indicates that both document unannounced rounds in the POD Log Book as the housing deputy makes notice of the Sergeant's visits in the electronic log book in each POD visited. The Sgt also electronically documents visits in each housing unit Tiburon system management notes. The rounds are sporadic throughout the day and PODs are visited randomly.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.13(a) & 115.13(c) and corrective action is required.

Corrective Action Recommended:

115.13(a): Here are 4 areas that are not completely identified in the Staffing Plan as required in Standard provisions 115.13:

1. Agency to provide auditor with documentation which specifically verifies completion of the security/camera system for hallway blindspots.
2. Agency to provide auditor with documentation which verifies camera updates in specific housing units and exercise yards.
3. Agency to document the specific composition of the IP population within the Facility.

	<p>4. Agency to identify institutional programs which occurs on each specific shift.</p> <p>115.13(c): Agency to provide auditor with Staffing Plan reviews for year 2022 & 2023 where the reviews assess,, determine, and document whether adjustments are needed to:</p> <p>1). Establish an updated staffing plan for both years 2022 & 2023</p> <p>2). Discussion of facility's deployment of video monitoring systems and other monitoring technologies</p> <p>3). Resources the facility has available to commit to ensure adherence to the staffing plan</p> <p>Corrective Action Completion 3/10/2025:</p> <p>115.13(a): 3/10/2025 - Agency uploaded the corrected 2022, 2023 and 2024 Staffing Plans to the OAS in order to meet the requirements of Standard provision 115.13(a).</p> <p>115.13(c): On 12/16/24, Agency provided a the 2022 Staffing Plan Review signed on 4/1/2022. The Staffing Plan Review assesses, determines, documents and addresses whether adjustments are needed to the previous Staffing plan, deployment of video monitoring systems and other monitoring technologies and resources the facility has available to commit to ensure adherence to the staffing plan. 2/19/2025, Agency provided upload of Final 2022 Staffing Plan review which included discussion of facility's video monitoring system and other monitoring technologies.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.13(a) & 115.13(c) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.13.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>115.14(a): N/A - Agency states they do not house youthful Incarcerated Persons (IPs). In the past 12 months, No housing units exist to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters.</p> <p>115.14(b): N/A- Agency states they do not house youthful Incarcerated Persons (IPs). In the past 12 months, No housing units exist to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters.</p> <p>115.14(c): N/A - Agency states they do not house youthful Incarcerated Persons (IPs). In the past 12 months, No housing units exist to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.14.</p>
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115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.15(a): PAQ indicates that The facility does not conduct cross-gender strip or cross-gender visual body cavity searches of IPs. In the past 12 months, no cross-gender strip or cross-gender visual body cavity searches of inmates occurred. Training shall be provided to sworn staff in how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner and in the least intrusive manner possible, consistent with appropriate security needs. In the unlikely event of a cross-gender strip search, the search will be documented on a Marin County Sheriff's Office Strip Search Form.</p> <p>Policy CUS 302.2 mandates that "The Marin County Sheriff's Office endeavors to comply with the training standards in the PREA Rule and to ensure that all staff, volunteers, and contractors, are aware of their responsibilities and that staff, volunteers, contractors, and incarcerated persons are aware of the policies and procedures of the facility as they relate to PREA." "Training shall be tailored according to the sex of the incarcerated persons at the facility. Staff should receive additional training on security measures and the separation of male and female populations in the same facility if incarcerated persons have been reassigned from a facility that houses only male or female incarcerated persons.</p> <p>Training should include written testing to validate knowledge and understanding of the material. The PREA Coordinator shall document, through signature or electronic verification, that staff, volunteers, and contractors have received and understand the</p>

training. The Training Manager will maintain training records on all those receiving training in accordance with procedures developed by the PREA Coordinator."

Policy CUS 511.3 Pat-Down Searches mandates that "Pat-down searches will be performed on all incarcerated persons/arrestees upon entering the secure booking area of the facility. All persons being booked into the Marin County Jail shall be subject to either a pat down search, metal detector search, body scan and/or a thorough clothing search, including the examination and seizure of any item(s) found to be in the subject's purse, pockets, or personal belongings. Persons who have been arrested and are to be booked, but as to whom there is an expectation of immediate release on a written promise or by posting bail shall, regardless of the nature of the offense, only be subjected to a pat down and/or electronic scanning for metal detection, unless there is a threat to the safety or security of the Marin County Jail or persons. Additionally, pat-down searches should occur frequently within the facility. At a minimum, the staff should conduct pat-down searches in circumstances that include:

- "(a) When incarcerated persons leave their housing units to participate in activities elsewhere in the facility (e.g., exercise yard, medical, program, visiting) and when they return.
- (b) During physical plant searches of entire housing units.
- (c) When incarcerated persons come into contact with other incarcerated persons housed outside of their housing units, such as work details.
- (d) Any time the staff believes the incarcerated persons may have contraband on their persons.

The facility shall not permit cross-gender pat-down searches of female incarcerated persons, absent exigent circumstances. Absent the availability of a same sex staff member, it is recommended that a witnessing staff member be present during any cross-gender pat-down search involving female incarcerated persons. All cross-gender pat-down searches of female incarcerated persons shall be documented (28 CFR 115.15)."

Interview with non-medical staff (involved in cross-gender strip or visual searches):

N/A - Agency reports that on-medical staff not involved in cross-gender strip or visual searches per Policy during the past 12 months. During Intake physical plant review, auditor observed the pat-down and strip search area with custody staff. Males staff search Male IPs and Female staff search Female IPs for Intake strip-search. Per policy, no cross-gender strip search is conducted anywhere in the facility. All staff have been trained on cross-gender pat-down search procedures when required and shall be documented and approved by leadership prior to conducting the cross-gender pat-down search. The area in Intake where the strip searches are conducted is not visible to cross-gender Intake or Booking staff. There are no cameras in the strip-search room. Intake also has access to the Body Scanner which does not identify breasts or genitals when utilized.

115.15(b): The facility does not permit cross-gender pat-down searches of female IPs, absent exigent circumstances (facilities have until August 20, 2015, to comply; or August 20, 2017, if their rated capacity does not exceed 50 inmates). The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

Policy CUS 511. Section 511.3 Pat-Down Searches mandates that no pat-down

searches of female inmates conducted by male staff that did not involve exigent circumstance(s) and no pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s)

Agency reports that no pat-down searches of female inmates that were conducted by male staff and no pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s) Interview with Random Sample of 9 Staff indicate that if female staff are not available to conduct pat-down searches of female inmates, the jail does not restrict those inmates' access to programs or out-of-cell opportunities. A number of staff recall Agency calling same-sex custody staff from the street to assist with pat-down searches of female inmates.

Inmate Interview Questionnaire (Female inmates) indicates none experienced or could recall not being able to participate in activities outside of their cell because female staff was unavailable to conduct pat-down searches.

115.15 (c): Policy CUS 511 Searches mandates that all cross-gender strip searches, cross-gender visual body cavity searches and all cross-gender pat-down searches of female inmates be documented. Agency reports there is no documentation of cross-gender strip searches and cross-gender visual body cavity searches of all inmates or documentation of all cross-gender pat-down searches of female inmates that occurred over the past 12 months. Female staff are always assigned on each shift to assist with same gender searches. Agency can also call for assistance from the Sheriffs if need-be.

115.15(d): Agency reports that the facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera)."The facility shall not permit cross-gender pat-down searches of female incarcerated persons, absent exigent circumstances. Absent the availability of a same sex staff member, it is recommended that a witnessing staff member be present during any cross-gender pat-down search involving female incarcerated persons. All cross-gender pat-down searches of female incarcerated persons shall be documented (28 CFR 115.15)."

PREA Policy 606.4 (m) mandates that the PREA Coordinator shall implement "a protocol requiring mid-level or higher-level supervisors to conduct and document unannounced inspections to identify and deter sexual abuse and sexual harassment. The protocol shall prohibit announcing when such inspections are to occur, unless it is necessary for operational considerations (28 CFR 115.13)."

Interview with IPs indicates that out of 15 IPs interviewed, two female IPs stated that they were viewed a number of times showering by cross-gender staff in F-Pod #3 upstairs Shower. They both requested that the shower door or PREA poster on the door be adjusted higher than what it is. Both Auditor and the PREA Compliance Manager viewed female IP POD #3 upstairs Shower and verified the statement of both IPs during the interview.

1 male IP indicated he was viewed by staff when defecating on the cell toilet. but did not grieve the act. A second male IP indicated he has not heard female staff conducting an announcement or announcing their presence when entering the

housing unit.

Interview with Random Sample of Staff indicated all stated that they announce their presence, "Female/Male in POD", when entering a housing unit that houses residents of the opposite gender and IPs are able to dress, shower, and toilet without being viewed by staff of the opposite gender.

Agency has not provided policy & procedure which enables IPs to shower and change clothing without non-medical staff of the opposite gender viewing breasts, buttocks or genitalia except in exigent circumstances. Agency has not provided policy and procedure that requires opposite gender to announce their presence when entering a housing unit of the opposite gender.

Agency to provide auditor with policy and procedure that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).

Agency to provide auditor with protocol implementation and procedures which require staff of the opposite gender to announce their presence when entering an inmate housing unit.

SITE REVIEW - CROSS-GENDER VIEWING:

During the Onsite Audit week, auditor was accompanied by the PREA Compliance Manager during the Physical Plant Review, IP and staff interviews, who announced her presence whenever entering a POD which houses male IPs (Female on the POD).

The Auditor observed a number of cross-gender custody and cross-gender medical staff failing to announce their presence when entering a cross-gender POD.

Required Corrective Action:

115.15(d):

1. Agency to provide auditor with policy and procedure that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).
2. Agency to provide auditor with protocol implementation and procedures which require staff of the opposite gender to announce their presence when entering an IP housing unit.
3. Auditor to conduct visit to the facility within 180-days of Corrective Action period in order to verify that opposite gender custody staff and medical staff announce their presence when entering an IP housing unit and practice is institutionalized.
4. Auditor to conduct visit to the facility within 180-days of Corrective Action period in order to verify female IP F-POD #3 upstairs Shower view has been corrected in order to dissuade cross-gender viewing of IPs when showering.

115.15(e): Policy CUS 511.5 Searches mandates that "Staff shall not search or

physically examine a transgender or intersex incarcerated person for the sole purpose of determining genital status (see the Prison Rape Elimination Act Policy for transgender and intersex definitions). If genital status is unknown, it may be determined during conversations with the person, by reviewing medical records, or, if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional (28 CFR 115.15)." Agency reports that no such searches have occurred in the past 12 months. Interview with Random Sample of Staff indicates he is aware of the policy prohibiting staff from searching or physically examining a transgender or intersex IP for the purpose of determining that IP's genital status. He would otherwise ask the Transgender IP his/her preference in staff search, obtain the assistance from the nurse practitioner or review past determinations from Intake or Booking . Interview with Transgender/Intersex Inmates indicates that he or other inmates are never naked in full view of Male/Female staff.

115.15(f): Agency reports 100% of all security staff who received PREA training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

Agency provided video training to both Sworn staff and Non-sworn.

Interview with Random Sample of Staff indicate staff have been trained on how to conduct cross-gender pat-down searches and searches of transgender and intersex IPs in a professional and respectful manner consistent with security needs. Training was conducted during bi-annual training in 2023 or 2024.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.15(d) & 115.15(f) and corrective action is required.

Corrective Action Recommended:

115.15(d):1. Agency to provide auditor with policy and procedure that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).

2. Agency to provide auditor with protocol implementation and procedures which require staff of the opposite gender to announce their presence when entering an IP housing unit.

3. Auditor to conduct visit to the facility within 180-days of Corrective Action period in order to verify that opposite gender custody staff and medical staff announce their presence when entering an IP housing unit and practice is institutionalized.

4. Auditor to conduct visit to the facility within 180-days of Corrective Action period in order to verify female IP F-POD #3 upstairs Shower view has been corrected in

order to dissuade cross-gender viewing of IPs when showering.

115.15(f): Cross-Gender and Transgender Pat Searches - HD. mp4 is not compatible with the Online Audit System and auditor is unable to view.

1. Agency to upgrade from HD. mp4 format to a more supportable format such as mp4, which the OAS will accept.

Corrective Action Completion 2/17/2025:

115.15(d): 10/21/24 - Agency provided auditor with Policy 807 Incarcerated Person Hygiene pg 5 Section 807.12 Additional Privacy Requirements, which mandates that "Incarcerated persons shall be permitted to shower, perform bodily functions, and change clothing without non-medical staff of the opposite sex viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an incarcerated person housing unit (28 CFR 115.15)."

Agency uploaded IMG 8230.jpg to the Supplemental file which displays the corrected privacy film on Shower #3 in F POD upstairs shower female housing unit. On 2/19/25, auditor conducted a Corrective Action review of the Marin County Jail.

On 2/17/2025, auditor conducted an Onsite Corrective Action Review to verify that cross-gender custody and medical staff announce their presence when entering an IP housing unit. Auditor identified both cross-gender custody and medical staff announced their presence when entering cross-gender housing units. Auditor also interviewed the following IPs in their respective housing units:

F-Pod Female Housing - 4 IPs

C-Pod Male Housing - 3 IPs

B-Pod Male Housing - 6 IPs

A-Pod Male Housing - 4 IPs

All 17 IPs verified that both medical and custody staff announce their presence with entering a cross-gender housing unit.

Auditor also reviewed the upstairs shower in F-Pod Female Housing to verify the IPs in that unit shower without cross-gender viewing by staff.

115.15(f): 10/21/24 Agency provided auditor with the Cross-Gender and Transgender Pat Searches in HD (1), webm format. New format works in the OAS for viewing.

The agency/facility has met the requirements of Standard provision(s) 115.15(d) & 115.15(f) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.15.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>115.16(a): Policy 606.5 mandates that "Inmates can make confidential, toll-free calls to report inmate sexual abuse to Community Violence Solutions' Rape Crisis Center by dialing #72 from inmate telephones:</p> <ul style="list-style-type: none"> • Inmates who do not speak English may request a translator upon contacting the Community Violence Solutions' Rape Crisis Center. • Those inmates who are hearing impaired shall be provided a TDD machine and may dial the Community Violence Solutions' Rape Crisis Center using the direct telephone number provided in the inmate handbook. • Signage shall be posted in all facilities advising that inmate calls to these numbers are confidential and not subject to monitoring." <p>Policy mandates MCSO to provide disabled IP equal opportunity to participate in or benefit from all aspects to prevent, detect, and respond to sexual abuse and sexual harassment. MCSO has secured the services of Language Line Service Inc. for translation services. IP who are hearing impaired are provided a TDD machine if they need to report sexual abuse to the Community Violence Solutions' Rape Center. Agency provided auditor with PREA poster language in both English & Spanish and provided Language Line receipts which verifies paying for IP use of Language Line for communication needs for IPs with disabilities, reporting sexual abuse or sexual harassment or needs for Advocate or emotional support from outside agencies and internal reporting or intake communication.</p> <p>Interview with Agency Head indicates that Agency established procedures to provide IPs with disabilities and IPs who are limited English Proficient (IPs) 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. There are multiple bi-lingual custody staff on duty, PREA posters in English and Spanish and IPs are classified based on disability needs.</p> <p>Interview with IPs (with disabilities or who are limited English proficient) indicates that finds that the facility provides information about sexual abuse and sexual harassment that the IP understands through the interpreter or interpretation service. PREA forms are also provided in their native language.</p> <p>INTERVIEW PROCESS DURING THE FORMAL INTERVIEW PROCEDURE WITH IPS:</p> <p>During the formal interview. with IPs who are Limited English Proficient, they were offered translation services by way of bi-lingual custody staff for three IPs who were Limited English Proficient. When testing Intake/Booking, auditor found that LEP IPs are provided either bi-lingual custody staff or Language Line through medical. Language line was activated in the presence of auditor and initiated immediately upon calling for a linguist.</p> <p>115.16(b): Agency reports that MCSO uses Language Line Service Inc. for translation services for LEP IP, MCSO has a English/ Spanish Language PREA education form for</p>

	<p>inmates to review and sign. Agency provided auditor with IP Education forms in both English and Spanish to include Language Line receipts to verify use of interpreters for IPs with disabilities, reporting and communication regarding sexual abuse, sexual harassment, Advocacy or need for emotional support.</p> <p>Interview with IPs (with disabilities or who are limited English proficient) indicates that During the formal interview. with IPs who are Limited English Proficient, they were offered translation services by way of bi-lingual custody staff for three IPs who were Limited English Proficient. When testing Intake/Booking, auditor found that LEP IPs are provided either bi-lingual custody staff or Language Line through medical.</p> <p>Language line was activated in the presence of auditor and initiated immediately upon calling for a linguist.</p> <p>115.16(c): PREA Policy CUS 606.7 mandates that "Should an investigation involve incarcerated persons who have disabilities or who have limited English proficiency, the first responder shall not rely on incarcerated person interpreters, incarcerated person readers, or other types of incarcerated person assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise incarcerated person safety, the performance of the first responder duties, or the investigations of sexual abuse or sexual harassment allegations."</p> <p>Agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.</p> <p>Agency reports that in the past 12 months, there were no instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.</p> <p>Interview with Random Samples of Staff - Q: 9</p> <p>Interview with IPs (with disabilities or who are limited English proficient) indicates that During the formal interview. with IPs who are Limited English Proficient, they were offered translation services by way of bi-lingual custody staff for three IPs who were Limited English Proficient. When testing Intake/Booking, auditor found that LEP IPs are provided either bi-lingual custody staff or Language Line through medical.</p> <p>Language line was activated in the presence of auditor and initiated immediately upon calling for a linguist.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.16.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.17(a): MCSO verifies PREA compliance prior to hiring or promoting anyone who may have contact w/ IP and prohibits enlisting the services of any contractor or volunteer who may have contact w/IP who:

- Has engaged in sexual abuse in a prison, jail or lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C 1997);

- Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or

- Has been civilly or administratively to have engaged in the activity

Policy states that "upon hiring any employee, staff, contractor or volunteers, they will be asked during the hiring process about any previous misconduct described in paragraph (A) of this section."

Agency provided auditor with blank copy of the PREA Compliance Verification utilized for all employees and contractors for the Marin County Sheriff's Office prior to being hired or promoted. Agency provided promotional Policy and required documentation which verifies Agency conducts and has completed the 3 Required Questions for 22 pf 23 custody staff employees and promotional staff. Agency informs auditor that a new Contract staff failed to Agency to provide auditor with verification of compliance with Standard 115.17 by providing documentation of verified completion of 10 Contract staff hiring requirements within 180 days of the Corrective Action period.

115.17(b): Agency reports that PREA Policy 606 requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or enlist the services of any contractor, who may have contact with IP.

Interview with Administrative HR staff indicates the facility considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractors, who may have contact with IPs.

115.17(c): Policy requires that any new employees, contractors and volunteers who may have contact with IP, we (a) conduct a criminal background record check, and (b) consistent with federal, state, and local law, make our best effort to contact all prior employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of allegation of sexual abuse.

Agency reports that in the past 12 months there have been 26 new employees (custody staff), who have had criminal record background checks. Auditor found that Agency only had acquired 23 new employees and the the additional number of 3 belonged to Contractors

Interview with HR Administrative Staff indicates that criminal records background checks are performed by the facility through Professional Standards Unit (PSU) to check or consider pertinent civil or administrative adjudications role mean we hired employees who may have contact with IP's and all employees who may have contact with IP's, who are considered for promotions. This includes the same actions for any contractor who may have contact with IP's as well.

115.17(d): Agency reports that that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates. In the past 12. months 1 contract for services where criminal background record checks were conducted on all staff covered in the contract who might have

contact with IPs.

Interview with HR Administrative Staff indicates that criminal records background checks are performed by the facility through Professional Standards Unit (PSU) to check or consider pertinent civil or administrative adjudications role mean we hired employees who may have contact with IP's and all employees who may have contact with IP's, who are considered for promotions. This includes the same actions for any contractor who may have contact with IP's as well.

115.17(e): Agency reports that policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates, or that a system is in place for otherwise capturing such information for current employees.

Agency provided auditor with 6/12/24 copy of memorandum from the Legal Process Manager/Custodian of Records of the Marin County Sheriff's Office to the Undersheriff which states:

"State and Federal background checks, via Livescan fingerprints, are conducted on all employees of the Marin County Sheriff's Office, employees of other County Departments working within or having access to any Marin County Sheriff's Office facilities, and contract employees working within Marin County Sheriff's Office facilities on special projects. Subsequent arrest notifications are received on above listed persons."

Interview with Administrative (HR) Staff indicates that the facility presently uses LiveScan with checks on both DOJ and FBI returns.

115.17(f): Agency asks 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

Interview with Administrative (HR) Staff indicates the facility asks all applicants employees who may have contact with IPs about previous misconduct in written applications for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current employees. The facility imposes upon employees a continuing affirmative duty to disclose any such previous misconduct via the employment application.

115.17(g): Agency reports that Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination per PREA Policy 606.2.

115.17(h): Agency reports that Unless prohibited by law, the agency 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 to work.

Interview with Administrative (HR) Staff indicates that when a former employee applies for work at another institution, upon request from institution, the facility provides information on substantiated allegations of sexual abuse, or sexual

	<p>harassment involving the former employee, unless prohibited by law.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.17(a) and corrective action is required.</p> <p><u>Corrective Action Recommended:</u></p> <p>115.17(a): Agency informs auditor that a new Contract staff failed to complete the 3 Required Questions prior to hire, non-compliant with Standard provision 115.17(a).</p> <p>1. Agency to provide auditor with verification of compliance with Standard 115.17 by providing documentation of verified completion of 10 Contract staff hiring requirements within 180 days of the Corrective Action period.</p> <p><u>Corrective Action Completion 1/13/2025:</u></p> <p>115.17(a): 1/13/25 - Agency uploaded 11 newly hired custody staff. FBI clearance and 3 Required Questions completed prior to the hire date. The newly hired custody staff records are compliant with the PREA Standards. The updated HR Records Review Tool, Standard 115.17a and 115.17a-2 have been uploaded to the Supplemental File.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.17(a) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.17.</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.18(a): N/A - Agency reports that Standard 115.18 is not applicable to MCSO as we have not acquired a new facility, or had a substantial expansion, or modification.</p> <p>115.18(b): Since last PREA Audit we have added Cameras to the recreation yards, Housing Units, hallways, Stairwells, and any other areas that IP's traveled to or through for additional security. Agency is currently in the process of updating and installing new monitoring technology.</p> <p>Interview with Agency Head indicates that when designing, acquiring, or finding substantial modifications to facilities, the agency considers the effects of such changes on its ability to protect it eyepiece from sexual abuse. This is accomplished</p>

by ensuring IP's have an avenue to report to staff. Agency has a system in place to keep IPs secure in their housing PODs and Agency provides adequate close surface coverage for monitoring. Agency uses monitoring technology to enhance the protection of IPs from incidents of sexual abuse by eliminating blind spots and employing cameras which now record and maintain classification review. Interview with Facility Commander or designee indicates that when installing monitoring technology, such as a video monitoring system or electronic surveillance, the facility considers using such technology to enhance IP's protection from sexual abuse through wide-angle lenses and assessing and recording blind spot coverage, and maintains storage of said coverage. Agency to provide auditor with copy of minutes from meetings referencing installing or updating monitoring technology applied since the Last PREA Audit.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.18(b) and corrective action is required.

Corrective Action Recommended:

115.18(b): 1. Agency to provide auditor with copy of minutes from meetings referencing installing or updating monitoring technology applied since the Last PREA Audit.

Corrective Action Completion 10/21/24 :

115.18(b): 10/21/24 Agency provided auditor with:

Fully executed BOS Letter for Advertisement. PDF and Fully Executed director Award letter Jail Video Security. PDF.

BOS Letter dated 2/7/23 discusses the current 20 year old video security system and need for replacement.

Video Security Award Letter dated 4/18/23 discusses awarding one of the contract bids for the video security system.

The agency/facility has met the requirements of Standard provision(s) 115.18(b) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.18.

Auditor Overall Determination: Meets Standard
Auditor Discussion
<p>115.21(a): Agency states that Marin County Sheriff's Office conducts all investigations and follows a uniform evidence protocol. PREA Policy 606.10 mandates that "An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed department-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71)."</p> <p>When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. Agency provided auditor with copy of the Marin SART Protocol March 2015. "The mission of the Sexual Assault Response Team (SART) is to coordinate and implement services to victims of sexual assault. SART is an innovative concept that allows for enhanced sensitivity to sexual assault victims' needs, rapid medical response, more enhanced enforcement interviews, and greater prosecution ability, SART is a countywide program coordinated by Community Violence Solutions (CVS), Marin County District Attorney's Office (MCDA), Local Law Enforcement Agencies, Kaiser Permanente-San Rafael and Vallejo, Novato Community Hospital, Marin General Hospital, Marin County District Attorney's Victim-Witness Unit (MCDA-VWU), Napa/Solano SART/SANE and the California Department of Justice-Santa Rosa and Richmond Crime Labs. Services offered through SART include medical evidentiary collection and examination, forensic interviews, crisis intervention . services, advocacy, court accompaniment, counseling, information and referrals, follow up, expert witness testimony and other support services for the victim and the family.</p> <p>Sexual Assault Nurse Examiners (SANE's) who have completed training at UC Davis, provide the medical evidentiary examinations."</p> <p>Interview with Random Sample of Staff indicates the Agency utilizes the Marin SART Protocol 2020 which provides for Statement of Purpose, Role of Law Enforcement, Child and family Services, Sexual Assault Nurse examiner, Role of the Community Violence Solutions, Victim Witness Unit, DA's Office and Kaiser Permanente Vallejo Medical Center. Marin County Sheriff's Department is responsible for conducting sexual abuse investigations.</p> <p>115.21(b): SART Protocol and Roles indicates that the protocol is developmentally appropriate for youth, however, the Marin County Sheriff's Office facility does not house youth.</p> <p>Agency is responsible for conducting both administrative and criminal sexual abuse investigations and follows a uniform evidence protocol adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication. "A National Protocol for Sexual Assault Medical Forensic Examinations,</p>

Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

115.21(c): PREA Policy 606 and IP handbook mandates that all IP who experience sexual abuse access to forensic medical examinations at no cost to the victim. The IP handbook indicates that IP people have the right to receive free emergency medical care and counseling. Medical services may include a medical forensic exam to collect evidence and to provide care, treatment for any injuries you may have, and medication to prevent pregnancy and sexually transmitted infections, including HIV. Forensic examinations are not conducted at the facility. SANE/SAFE forensic examinations are provided at Vallejo Medical Center. PREA Policy 606.9 Examination, Testing, and Treatment indicates that Forensic medical examinations are offered without financial cost to the victim. Examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). A qualified medical practitioner does not perform forensic medical examinations. Agency reports that no SAFE/SANE exams were performed by SANEs/SAFEs nor qualified medical practitioners during the past 12 months.

Interview with SAFEs/SANes Staff indicates that they are responsible for conducting all forensic examinations for the Marin County Jail. SAFE/SANE are on call 24/7.

115.21(d): Agency provided auditor with copy of updated 2023 MOU with Community Violence Solutions/Rape Crisis Center, which provides immediate crisis intervention accompaniment and advocacy services for victims of sexual assault. Operational agreement is effective 10/1/22 through 9/30/2025

Interview with PREA Compliance Manager indicates that if requested by the victim, a victim advocate from Community Violence Solutions accompanies the victim and provides emotional support, crisis intervention, and referrals during the forensic medical examination process and investigatory interviews. If needed, prior to arrival of Community Violence Solutions on scene, Marin CJ Mental Health Staff or Marin County Rape Crisis provides emotional support for the victim.

Only one IP who Reported Sexual Abuse was housed in the Marin County Jail during the Onsite Audit. The IP declined to be interviewed by auditor.

115.21(e): Agency reports that if requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. as mandated by PREA Policy 606.9 (b). Interview with PREA Compliance Manager indicates that, if a real crisis center provides victim, advocate, services qualifications are described in both MOU and the Marin County SART Protocol.

Only one IP who Reported Sexual Abuse was housed in the Marin County Jail during the Onsite Audit. The IP declined to be interviewed by auditor.

115.21(f): N/A - Agency reports that the facility is responsible for conducting administrative and criminal sexual abuse investigations.

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

	<p>115.21(h): N/A - Agency always makes a victim advocate from a rape crisis center available to victims per MOU and Marin SART Protocol 2020.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.21.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.22(a): PREA Policy 606.10 mandates that "An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed department-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71)."</p> <ul style="list-style-type: none"> - In the past 12 months, Agency received 7 allegations of sexual abuse and sexual harassment that were received. - In the past 12 months, 7 allegations resulting in an administrative investigation. - In the past 12 months, no allegations were referred for criminal investigation. - Referring to allegations received during the past 12 months, all administrative and/or criminal investigations were completed. <p>Interview with Agency Head or designee indicates that the Agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. Administrative or criminal investigations are completed for allegations of sexual abuse or harassment as allegation is received by line staff and reported to the on-duty Sergeant for a preliminary investigation. If the allegation is serious in nature, the case is referred to the PREA Coordinator for forensic investigation or further action.</p> <p>115.22(b): PREA Policy 606.10 Data Reviews mandates that allegations of sexual abuse/harassment upon IP shall be investigated promptly, thoroughly and objectively by the investigations Division. All investigative referrals shall be documented on an ARS report. All investigations are documented.</p> <p>Facility documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigations onto the PREA Original Allegation Report Form by the on-</p>

	<p>duty sergeant. All criminal investigations of IP sexual abuse shall be conducted by the Investigations Division and documented on an ARS report. Staff conducting these investigations shall be trained on conducting these types of investigations as outlined in 28 CFR 115.34. As part of the investigation, all prior complaints and reports of abuse involving the suspect shall be reviewed if the suspect is an IP.</p> <p>PREA Policy 606.14 mandates that Facility website and IP handbook verify Zero Tolerance policy and statement that any allegation of sexual abuse/harassment or retaliation shall be investigated.</p> <p>Interview with Investigative Staff Agency policy requires use, or sexual-harassment be referred for investigation to an agency with legal authority to conduct criminal investigations, unless the allegation does not involve potential criminal behavior.</p> <p>Investigation Policy is publicly available on the Agency website:</p> <p>The Marin County Sheriff's Office, in compliance with the Prison Rape Elimination Act of 2003, mandates zero tolerance toward all forms of sexual abuse, sexual harassment and sexual assault of any inmate in custody. There shall be zero tolerance for retaliation of any sort against anyone who reports or cooperates with the investigations of such acts. All incidents of sexual abuse that occur in the Marin County Jail shall be thoroughly investigated, documented and reported in accordance with the mandates set forth in the 2003 Prison Rape Elimination Act (PREA) and the Department of Justice National PREA Standards.</p> <p>115.22(c): N/A - Agency/Facility is responsible for criminal investigations.</p> <p>115.22(d): N/A - Auditor is not required to audit this provision.</p> <p>115.22(e): N/A - Auditor is not required to audit this provision.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.22.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.31(a): PREA Policy 302.3 mandates that All staff, volunteers and contractors who may have contact with incarcerated persons shall receive department-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. Agency provided auditor with blank copies of PREA Training Acknowledgement, Pamphlet PREA Overview for Contractors and Volunteers which provides Education, Prevention, Reporting and Responding, PDF slide presentation of</p>

training for Medical-Mental Health, Non-Sworn staff, Sworn staff and PREA Policy 302.3.

All staff, volunteers and contractors who may have contact with incarcerated persons shall receive department-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility.

The agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement, the common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Interview with Random Sample of 9 Staff indicates that all received mandatory PREA training prior to their hire date and received refresher training on a bi-annual basis.

Agency to upload copies of auditor selected training records to verify compliance with this Standard provision to the Supplemental File.

115.31(b): Agency reports that Marin County Jail operates one facility. The training is tailored for both male and female IP.

Agency to upload copies of training acknowledgements for verification of training for Sworn staff, non-sworn staff, contractors and volunteers.

115.31(c): PREA Policy 302 mandates custody staff shall receive comprehensive training every two years. In years comprehensive training is not provided, refresher information shall be provided on current inmate sexual abuse and sexual harassment policies. Agency to provide documentation via the Supplemental File of employee signatures or electronic verification signifying comprehension of the bi-annual training. Standard provision 115.31(c)

115.31(d): PREA Policy 302 mandates that all training shall be documented through signature or electronic verification that staff members understand the training they have received and their responsibilities in adhering to the mandates of policy.

Agency to provide documentation via the Supplemental File of employee signatures or electronic verification signifying comprehension of the training.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.31(a), 115.31(b), 115.31(c), 115.31(d), and corrective action is required.

Corrective Action Recommended:

115.31(a): 1. Agency to upload copies of auditor selected training records to verify compliance with this Standard provision to the Supplemental File.

115.31(b): Agency reports that Marin County Jail operates one facility. The training is tailored for both male and female IP.

1. Agency to upload copies of training acknowledgements for verification of training for Sworn staff, non-sworn staff, contractors and volunteers.

115.31(c): PREA Policy 302 mandates custody staff shall receive comprehensive training every two years. In years comprehensive training is not provided, refresher information shall be provided on current inmate sexual abuse and sexual harassment policies.

1. Agency to provide documentation via the Supplemental File of employee signatures or electronic verification signifying comprehension of the bi-annual training. Standard provision 115.31(c)

115.31(d): PREA Policy 302 mandates that all training shall be documented through signature or electronic verification that staff members understand the training they have received and their responsibilities in adhering to the mandates of policy.

1. Agency to provide documentation via the Supplemental File of employee signatures or electronic verification signifying comprehension of the training.

Corrective Action Completion 10/17/24 :

115.31(a): 8/20/24 Agency provided auditor with copies of 15 auditor selected employee training records regarding zero-tolerance for sexual abuse and sexual harassment.

115.31(b): 8/20/24 Agency provided auditor with copies of 15 auditor selected employee training records. Marin County Jail operates one facility. The training is tailored for both male and female IPs.

115.31(c): 10/17/24 - Agency provided auditor with 20 copies of PREA refresher training documentation completed by custody staff during the month of May 2023. The training consisted of training of Cross-Gender and the Transgender Pat Search Video.

115.31(d): 8/20/24, Agency provided auditor with requested documentation for 15 employee signatures or electronic verification signifying comprehension of the training received.

The agency/facility has met the requirements of Standard provision(s) 115.31(a),

	115.31(b), 115.31(c), 115.31(d) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.31.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.32(a): Volunteers and contractors who have contact with incarcerated people have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response. Agency has provided auditor with PREA training pamphlet for both contractors and volunteers to include the PREA training PDF presentation for non-sworn staff.</p> <p>Agency reports 258 volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>Interview with Volunteers and Contractors who have contact with IPs indicate they have been trained and the responsibilities regarding sexual abuse of sexual-harassment, prevention, detection, and response, per agency policy, and procedures. Agency to upload copies of the PREA Training Documentation (acknowledgement) to the Supplemental File for 258 volunteers and contractors training records to verify compliance with Standard provision 115.32(a).</p> <p>115.32(b): PREA Training Policy 302 mandates that PREA training for civilian staff, volunteers and contractors. The training outlines the facility's Zero Tolerance policy and how to report allegations of sexual abuse/harassment. Topics include:</p> <ul style="list-style-type: none"> -Overview of the PREA Law and Your Role -IP rights to be free from sexual abuse and harassment; staff and IP rights to be free from retaliation for reporting -Prevention and detection -Response and Reporting -Professional Boundaries and False Allegations -Effective and Professional Communication w/ IP <p>Interview with Volunteers and Contractors who have contact with IPs indicates they have been notified of the agency's zero-tolerance policy on sexual abuse and sexual harassment, as well as informed about how to report such incidents.</p> <p>115.32(c): Agency reports that the Facility keeps a copy of the PREA pamphlet which has a place for volunteer/contractor acknowledgement of training. PREA Policy 302 mandates the PREA Coordinator will maintain documentation confirming that volunteers and contractors understand the training they have received.</p> <p>Agency has not provided auditor with requested documentation which confirms that volunteers and contractors understand the training they have received. Agency to</p>

provide auditor with required documentation confirming that volunteers and contractors understand the training they have received and upload documentation to the Supplemental File for review and compliance verification.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.32(a), 115.32(c) and corrective action is required.

Corrective Action Recommended:

115.32(a): Agency to upload copies of the PREA Training Documentation (acknowledgement) to the Supplemental File for selected number of volunteers and contractors training records to verify compliance with Standard provision 115.32(a). 8/20/24. Auditor received the requested documentation for selected 5 volunteers and 3 contractors. Documentation verifies contractors and volunteers understood and acknowledged their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

115.32(c): Agency to provide auditor with required documentation confirming that volunteers and contractors understand the training they have received and upload documentation to the Supplemental File for review and compliance verification.

Corrective Action Completion 8/20/24 :

115.32(a): 8/20/24. Auditor received the requested documentation for selected 5 volunteers and 3 contractors. Documentation verifies contractors and volunteers understood and acknowledged their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

115.32(c): 8/20/24. Auditor received the requested documentation for selected 5 volunteers and 3 contractors. Documentation verifies contractors and volunteers understood and acknowledged their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

The agency/facility has met the requirements of Standard provision(s) 115.32(a) & 115.32(c), completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.32.

115.33	Inmate education
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1481 880">115.33(a): Policy 503.10 mandates the POD Deputy to provide orientation to all incarcerated people, explaining inmate rights, available programs, rules of conduct and disciplinary procedures to aid the inmate in his/her stay at the facility. Orientation will be conducted by the POD Deputy upon the inmate's arrival into the POD. Inmate education shall be provided to all housed inmates regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and the Sheriff's Office policy and procedures for responding to such incidents. The education will be accessible to all IP including those who are limited in English proficiency, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The Marin County Jail maintains documentation of inmate attendance. In addition to providing education, informational material such as posters and/or handouts shall be accessible and visible to IP throughout the facility.</p> <p data-bbox="256 887 1437 958">Agency reports 2436 IPs were admitted during past 12 months who were given this information at intake.</p> <p data-bbox="256 965 1477 1171">Interview with Intake Staff indicates that IPs are provided with information about zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassments through PREA forms and IP is provided copies of the signed forms. There are PREA posters throughout the facility and housing units which inform IPs how to report on IP phones through the PREA hotline.</p> <p data-bbox="256 1178 1461 1384">Interview with Inmate Interview Questionnaire- indicates that when an IP first arrived in Intake he/she received information about the facility's rules against sexual abuse and sexual harrassment. IPs who are disabled are provided assistance to understand zero tolerance, IP rights and reporting availabilities through staff interpreters, Language Line etc.</p> <p data-bbox="256 1391 1469 1462">During the Physical Plant Review, Auditor tested Intake procedures and Interpretation services with Intake Staff, medical, language line and bi-lingual staff.</p> <p data-bbox="256 1503 1469 2085">115.33(b): Agency reports that 464 inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. Agency provided auditor with the PREA Audit Inmate Records Review Tool which verifies IP Intake, PREA education, Screening and Reassessment dates accompanied by verification documentation signed by 24 IPs randomly selected by auditor. Handbook. and Orientation Policy 503 mandates the POD Deputy to provide orientation to all incarcerated people, explaining inmate rights, available programs, rules of conduct and disciplinary procedures to aid the inmate in his/her stay at the facility. Orientation will be conducted by the POD Deputy upon the inmate's arrival into the POD. Inmate education shall be provided to all housed inmates regarding their rights to be free from sexual abuse and sexual harassment and to be free from</p>

retaliation for reporting such incidents, and the Sheriff's Office policy and procedures for responding to such incidents. The education will be accessible to all IP including those who are limited in English proficiency, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The Marin County Jail maintains documentation of inmate attendance. In addition to providing education, informational material such as posters and/or handouts shall be accessible and visible to IP throughout the facility.

Interview with Intake Staff indicates that female IPs have been able to participate in activities outside of their cell if female staff was unavailable to conduct pat-down searches. Agency ensures female staff is available for each shift. In Intake, IPs are informed about the facility's rules against sexual abuse and sexual harassment through PREA poster, medical PREA form and Intake PREA questionnaire which each IP receives a signed copy in both English and Spanish.

Inmate Interview Questionnaire indicates IPs are informed of their right not to be sexually abused, How to report sexual abuse and sexual harassment, Their rights not to be punished for reporting sexual abuse or sexual harassment during the intake process. IPs sign the form which outlines these rights and given a signed copy before being housed.

115.33(c): Policy 503 Handbook and Orientation mandates that POD Deputy to provide orientation to all incarcerated people, explaining inmate rights, available programs, rules of conduct and disciplinary procedures to aid the inmate in his/her stay at the facility. Orientation will be conducted by the POD Deputy upon the inmate's arrival into the POD. Inmate education shall be provided to all housed inmates regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and the Sheriff's Office policy and procedures for responding to such incidents. The education will be accessible to all IP including those who are limited in English proficiency, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The Marin County Jail maintains documentation of inmate attendance. In addition to providing education, informational material such as posters and/or handouts shall be accessible and visible to IP throughout the facility. Agency has only one custody facility.

Interview with Intake Staff indicates that Agency ensures current IPs as well as those transferred from other facilities, have been educated on the agency's zero-tolerance policy on sexual abuse or sexual harassment through signed PREA training log documentation and available posters throughout the facility. Agency to provide auditor with copy of Intake Training log documentation conducted by the POD Deputy upon the IPs arrival into the POD. Auditor requests at least 20 IP signatures obtained over the past 90 days and provided to auditor via Supplemental File which verifies all IPs housed at Marin CJ have been educated within 30 days of intake.

115.33(d): Policy 503 Handbook and Orientation mandates the POD Deputy to provide orientation to all inmates once they are assigned to the housing unit. Orientation includes inmate rights, Zero Tolerance and sexual abuse/harassment reporting methods for all including deaf, visually impaired or otherwise disabled. Documentation of inmate attendance shall be maintained by Marin County Custody

Division. MCSO provides PREA education to inmates following booking and intake, when they enter their housing unit. Deaf, visually impaired, inmates with limited reading skills or otherwise disabled inmates are not provided education in formats accessible to them. The PREA education acknowledgment forms are in both English and Spanish.

Agency to provide auditor through Supplemental File formats provided to Deaf, visually impaired, IPs with limited reading skills or otherwise disabled IPs made available via IP Handbook and Orientation documents.

115.33(e): Policy CUS 503- Handbook_and_Orientation-1 mandates documentation of IP attendance shall be maintained by Marin County Custody Division. 1. Agency to provide auditor with documentation of IP participation in education sessions through the Supplemental File.

115.33(f): Policy 503- Handbook_and_Orientation-1 mandates Facility provide PREA education and informal material such as posters & handouts to be accessible to IP throughout the facility. Facility provides Zero-Tolerance and Reporting posters and signage throughout the facility in both English and Spanish. During the Onsite Audit Physical Plant Review, auditor viewed key PREA information continuously and readily available and observed throughout the facility through PREA posters, handbooks, brochures, other written formats available to IPs and staff.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.33(c), 115.33(d), 115.33(e) and corrective action is required.

Corrective Action Recommended:

115.33(c): 1. Agency to provide Intake Training log or documentation via Supplemental File which verifies all IPs have been educated within 30 days of intake.

115.33(d): 1. Agency to provide auditor through Supplemental File formats accessible to Deaf, visually impaired, IPs with limited reading skills or otherwise disabled IPs.

115.33(e): Policy CUS 503- Handbook_and_Orientation-1 mandates documentation of IP attendance shall be maintained by Marin County Custody Division.

1. Agency to provide auditor with documentation of IP participation in education sessions through the Supplemental File.

Corrective Action Completion 12/18/24 :

115.33(c): On 10/17/24, Agency provided auditor with 20 IPs who obtained PREA Inmate Education during intake at Marin County Jail between 2022 and 2024 and

	<p>signed the acknowledgement forms. IPs were informed on how to make a report of sexual abuse and sexual harassment, who to make a report to , Inmate rights under PREA and definitions of Sexual Harassment, Sexual Abuse and Voyeurism, and phone contact with Community Violence Solutions Crisis Line.</p> <p>115.33(d): On 12/18/24 agency provided the following information to correct narrative initially provided in the 10/17/24 Issue Log Corrective Action response: "Narrative has been updated to remove typos: Policy mandates the POD Deputy to provide orientation to all incarcerated people once they are assigned to the housing unit. Orientation includes inmate rights, Zero Tolerance and sexual abuse/harassment reporting methods for all including deaf, visually impaired or otherwise disabled. Documentation of inmate attendance shall be maintained by Marin County Custody Division. MCSO provides PREA education to inmates following booking and intake, when they enter their housing unit. Deaf, visually impaired, inmates with limited reading skills or otherwise disabled incarcerated people are provided education in formats accessible to them. The PREA education acknowledgment forms are in both English and Spanish."</p> <p>115.33(e): 10/17/24 - Agency provided auditor with randomly selected signed acknowledgements of another 20 IPs who participated in the PREA intake education between years 2022 and 2024. Marin CJ Custody Division maintains IP PREA training documentation.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.33(c), 115.33(d), 115.33(e) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.33.</p>
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115.34 Specialized training: Investigations	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.34(a): Agency reports and provided training certificates to verify Investigators receive specialized training through National Institute of Corrections NIC Sexual Investigation in a Confinement Setting, and SEXUAL ASSAULT INVESTIGATION (ICI) This is a foundation specialty course of Robert Presley Institute of Criminal Investigations (ICI). The course is designed to increase the investigator's knowledge of sexual assault and improve investigative techniques. The course teaches the reporting process for prosecution by means of experience-based learning. The course is recommended for station detectives and specialized sexual assault investigators. At the conclusion of this training course, the investigator will: Be knowledgeable in the field of sexual assault investigations, Be able to employ proper investigative techniques, Prepare reports for filing, Prepare a case for prosecution. This course</p>

	<p>meets the training requirements of PC 13516(c). Interview with 2 criminal Investigative staff indicates that they received training specific to conducting sexual abuse investigations in confinement. Topics included sexual abuse detention, impact of sexual abuse, sexual abuse investigation documentation steps.</p> <p>115.34(b): Agency reports that Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Interview with Investigative Staff indicates investigative staff receive training on techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection and evidence required to substantiate a case for administrative or prosecution referral.</p> <p>115.34(c): Agency reports documentations are kept in the detectives personnel/ training file. The record of completion is also kept in their list of POST classes attended per PREA Training Policy 302. Agency reports the Facility has 2 special investigators proof of their specialized training which they have provided certificates of completion.</p> <p>115.34(d): Auditor is not required to audit this provision.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.34.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.35(a): Policy PREA 302 mandates that specialized training shall be provided to all full-time and part-time medical and mental health practitioners who work regularly at the facility. Agency provided auditor with roster of both Medical and Mental Health practitioners assigned to the facility all of whom has attended and receive certificates for completion of training Their Role: Responding to Sexual Abuse via NICIC/gov/ Training.as of May 2024.</p> <p>Agency reports 25 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy, which meets the 100% threshold for compliance with the PREA Standard.</p> <p>Interview with Medical and Mental Health Staff indicates that the only PREA related specialized training Medical and Mental Health staff have received was the PREA training provided by Marin CJ custody staff and Trauma related training. Agency is</p>

requested to provide auditor copies of the 25 NICIC.GOV training certificates for completion by Medical and Mental Health Practitioners of their role in Responding to Sexual Abuse (PREA) & upload to the Supplemental File for review and compliance verification.

115.35(b): Agency reports that forensic exams are conducted outside of the facility per PREA Policy 606.9.

Interview with Medical and Mental Health staff indicates that Forensic examinations are conducted at Kaiser Permanente Hospital Vallejo or San Rafael by members of the SAFE/SANE on-call SART team.

115.35(c): Per PREA Policy 302.3 mandates that "Training should include written testing to validate knowledge and understanding of the material. The PREA Coordinator shall document, through signature or electronic verification, that staff, volunteers, and contractors have received and understand the training. The Training Manager will maintain training records on all those receiving training in accordance with procedures developed by the PREA Coordinator. Agency provided auditor with list of Medical and Mental Health practitioners who completed the PREA training. Agency to provide auditor with copies of PREA required training certificates for both medical and mental health practitioners. Signed certificates are to be uploaded to the Supplemental File for compliance verification.

115.35(d): Agency indicates that Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency. Agency to provide via Supplemental File documented training verification which ensures medical and mental health practitioners receive the PREA training for employees and contractors/volunteers.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.35(a), 115.35(c), 115.35(d), and corrective action is required.

Corrective Action Recommended:

115.35(a): Agency is requested to provide auditor copies of the 25 NICIC.GOV training certificates for completion by Medical and Mental Health Practitioners of their role in Responding to Sexual Abuse (PREA) & upload to the Supplemental File for review and compliance verification.

115.35(c): Agency provided auditor with list of Medical and Mental Health practitioners who completed the PREA training.

1. Agency to provide auditor with copies of PREA required training certificates for

	<p>both medical and mental health practitioners.</p> <p>2. Signed certificates are to be uploaded to the Supplemental File for compliance verification.</p> <p>115.35(d): Agency to provide auditor via Supplemental File documented training verification which ensures medical and mental health practitioners received the PREA training for employees and contractors/volunteers.</p> <p><u>Corrective Action Completion 10/17/24 :</u></p> <p>115.35(a): 10/17/24, Agency provided auditor with 31 copies of PREA 201 Specialized Training for Medical and Mental Health Practitioners who completed the 3 hour training via National Institute of Corrections (NIC).</p> <p>115.35(c): 10/17/24, Agency provided auditor with 31 copies of PREA 201 Specialized Training for Medical and Mental Health Practitioners who completed the 3 hour training via National Institute of Corrections (NIC).</p> <p>115.35(d): 10/17/24, Agency provided auditor with 31 copies of PREA 201 for Medical and Mental Health Practitioners who completed the 3 hour training via National Institute of Corrections (NIC). This course is intended to assist agencies in meeting the requirements of PREA standard 115.35 Specialized Training: Medical and Mental Health Care. Agency also provided auditor with PREA Presentation (Non-Sworn) video for Contractors and Volunteers This course allows staff to apply their medical and/or mental health knowledge and skills to contribute to investigations and provide care in accordance with PREA standards. Estimated duration: 3 hours. (NIC ID: 19ECCS2358).</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.35(a), 115.35(c), 115.35(d) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.35.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.41(a): Classification Policy 508.10 mandates all IP be screened assessed and classified during Booking for risk of being sexually victimized from those at high risk of being sexually abusive prior to being housed in Marin CJ. Marin County only has

one facility, therefore, there are no transfers to other facilities within the Agency. Interview with Staff Responsible for Risk Screening indicates that IPs are screened upon admission to the facility for risk of sexual abuse victimization or sexual abusiveness towards other IPs.

Interview with Inmate Interview Questionnaire indicates that majority of IPs recall Intake staff asked them questions during intake such as if they have been in jail or prison before, whether they have ever been sexually abused in the past and their sexual identity. Few IPs were asked the same questions after the initial intake by mental health practitioners.

MOCK DEMO PREA RISK SCREENING:

Auditor was accompanied by Risk Screening Staff to conduct the Mock Demo as no inmates were awaiting Booking in Intake. Entry into the Facility begins through the entry Dock and Sallyport where the arresting PD officer begins the entry procedure and has the IP sit on the Booking Bench to await the Booking and Intake procedure. The Booking staff reads the processing and IP rights which is in both English and Spanish to the IP. If needed, the Booking Officer either employs Language Line or bi-lingual staff to assist with translation during the Booking and Intake process. Testing of the Language Line was accomplished utilizing the Booking Jail Phone or Medical. IP is then Pat Searched (male staff with male IP or Female staff with Female IP). Booking officer then initiates and completes the TIBURON Intake Database questionnaire with the IP. If IP is to be housed at Marin CJ, Intake staff obtains writing exemplar from IP. Same process if IP has never been housed at Marin CJ before. IPs are then provided a phone call, fingerprints and photos. IP then sits with Medical nurse who asks PREA questions. The nurse sits in an office and the IP sits outside the half entry door. IPs who are awaiting booking are either seated far enough away to where they cannot hear their conversation. Upon completion, IP is strip-searched (male staff with male IP or Female staff with Female IP) and body scanner is also utilized. Classification then reviews the Intake per Policy and the IP is housed where the housing deputy provides IP with PREA education and signed acknowledgement for documented verification of IP PREA training.

115.41(b): Classification Policy 508 mandates all IP be screened, assessed and classified in Booking for risk of being sexually victimized from those at high risk of being sexually abusive within 72 hours of intake. Agency reports that 1653 IPs entered the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility

Interview with Staff Responsible for Risk Screening indicates that IPs are screened for risk of sexual victimization or risk of sexually abusing other IPs within 72 hours of intake.

Interview with Inmate Interview Questionnaire indicates that majority of IPs recall Intake staff asked them questions during intake such as if they have been in jail or prison before, whether they have ever been sexually abused in the past and their sexual identity. Few IPs were asked the same questions after the initial intake by mental health practitioners.

115.41(c): Classification Policy 508 mandates that booking deputies utilize the Correction Management System (CMS) classification screen, including the completion of the Decision Tree during the intake process within 72 hours of intake.

Agency to provide auditor with copy of the Decision Tree during intake process and Correction Management System (CMS) classification screen to verify use of an Objective Screening Instrument. Upload Decision Tree into the Supplemental File.

115.41(d): Agency to provide auditor with copy of the Objective Screening Instrument utilized during intake and Classification screening. Agency to ensure the screening uses all criteria 1 - 1-, at a minimum to assess risk of sexual victimization per Standard provision 115.41(d).

Interview with Staff Responsible for Risk Screening indicates that the initial screening considers:

- The intake Questionnaire
- PREA Questions
- Criminal History
- Medical Issue
- Perception of Vulnerability on a case by case basis
- Gang issues
- Prior housing in custody

The process for conducting the initial screening includes looking at prior incidents in criminal history and concerning response classification per initial screening.

115.41(e): Agency states that the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

Interview with Staff Responsible for Risk Screening indicates that the initial screening considers:

The intake Questionnaire

PREA Questions

Criminal History

Medical Issue

Perception of Vulnerability on a case by case basis

Gang issues

Prior housing in custody

115.41(f): Classification Policy 508.6 mandates that within 30 days of intake, an IP's risk level shall be reassessed when warranted due to incident of sexual abuse or recent receipt of additional, relevant information that bears on the IP's risk of sexual victimization or abusiveness.

Agency reports no IPs entering the facility with ether through intake or transfer within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

Agency reports that IPs risk level shall be reassessed when warranted due to incident of sexual abuse or receipt of additional, relevant information that bears on the

inmate's risk of sexual victimization or abusiveness. There is no reassessment of the general population.

Interview with Staff Responsible for Risk Screening indicates that an IPs risk level is reassessed within 30 days or within 2 weeks of intake.

Interview with IP Questionnaire indicates IPs were not asked the PREA intake questions after their initial Intake and Booking unless they were interviewed by a mental health or medical practitioner.

Agency provided auditor with copy of IP Records Review tool with supporting documentation for 24 IPs. The documentation determined that 7 IPs were not reassessed within 30-days of intake, non-compliant with Standard provision 115.41(f).

1. Agency to provide auditor with a Roster of 24 IPs who were housed at Marin CJ for 30-days who's admission dates were between 9/15/24 and 11/16/24. Auditor will conduct a random IP selection to verify that reassessments were conducted and completed per Standard provision 115.41(f) and 115.41(g).
2. Agency to upload IP reassessment documentation to the Supplemental File for compliance verification.

115.41(g): Classification Policy 508 mandates that within 30 days of intake, an inmate's risk level is reassessed when warranted due to an incident of sexual abuse or a receipt of additional, relevant information that bears on the inmate's risk of sexual victimization or abusiveness. There is no reassessment conducted with the general population inmates.

Interview with Staff Responsible for Risk Screening indicates that an IPs risk level is reassessed within 24 hours every other Wednesday face to face.

Interview with IP Questionnaire indicates IPs were not asked the PREA intake questions after their initial Intake and Booking unless they were interviewed by a mental health or medical practitioner. Agency to explain why they state that there is no reassessment of the general population, which is non-compliant with Standard provision 115.41(f).

115.41(h): Classification Policy 508.4.1 mandates that Incarcerated Persons (IPs) may not be compelled by threat of discipline to provide answers to screening questions.

Interview with Staff Responsible for Risk Screening indicates that IPs are not disciplined for refusing to respond to or for not disclosing complete information related to the PREA questions at Intake and Booking.

115.41(i): Agency reports that appropriate controls are implemented on the dissemination with 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.

Interview with PREA Coordinator indicates only sworn staff has access to an IPs risk assessment within the facility in order to protect sensitive information from exploitation.

Interview with PREA Compliance Manager indicates only classification deputies look deep into IP risk assessments.

Interview with Staff Responsible for Risk screening indicates the Agency outlines only sworn staff can have access to an IPs risk assessment within the facility in order to protect sensitive information from exploitation.

RECORD STORAGE - During the Onsite Audit, the auditor, accompanied by the PREA Compliance Manager gained access to the only Locked Documents Storage Unit. The unit was a large locked closet secured and locked with the PREA Compliance Manager and the PREA Coordinator who maintains the security. Within the Locked Storage unit (located in the Sheriff's Training Room off the Administration Hallway) Logs, investigations, grievances.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.41(c), 115.41(f), 115.41(g), and corrective action is required.

Corrective Action Recommended:

115.41(c): 1. Agency to provide auditor with copy of the Decision Tree during intake process and Correction Management System (CMS) classification screen to verify use of an Objective Screening Instrument. Upload Decision Tree into the Supplemental File.

115.41(f): Agency provided auditor with copy of IP Records Review tool with supporting documentation for 24 IPs. The documentation determined that 7 IPs were not reassessed within 30-days of intake, non-compliant with Standard provision 115.41(f).

1. Agency to provide auditor with a Roster of 24 IPs who were housed at Marin CJ for 30-days who's admission dates were between 9/15/24 and 11/16/24. Auditor will conduct a random IP selection to verify that reassessments were conducted and completed per Standard provision 115.41(f) and 115.41(g).

2. Agency to upload IP reassessment documentation to the Supplemental File for compliance verification.

115.41(g): 1. Agency to explain why they state that there is no reassessment of the general population, which is non-compliant with Standard provision 115.41(f).

Corrective Action Completion 2/20/25:

115.41(c): On 12/15/24, Agency provided auditor with copy of the Objective Screening Instrument, Classification Decision Tree Section and Tracking and Classification Decision Tree PNG. Review of the Screening Instrument and Classification documents verify that the screening instrument and Classification Decision Tree meets Standard provision 115.41(c).

	<p>115.41(f): On 2/20/25, Agency uploaded a roster of IPs who were booked and housed at Marin CJ for 30-days who's admission dates were between 9/15/24 and 11/16/24. Auditor conducted a random selection of 24 IPs to verify that reassessments and PREA Education were conducted and completed.</p> <p>On 2/25/25, Auditor verified that the 24 selected IPs who's admission dates were between 9/15/24 and 11/16/25 were screened and was provided their PREA initial and comprehensive education to include their 30-day reassessments not to exceed 30 days after the IPs arrival at the facility per Standard provision 115.41(f). Agency provided a PREA Audit IP Review Tool and supporting documentation to verify compliance.</p> <p>115.41(g): 2/3/2025 Classification Clarification memo uploaded which clarified Policy 508 language that indicated that there was no reassessment of the general population.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.41(c), 115.41(f), 115.41(g) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.41.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.42(a): Classification Policy 508.10 PREA Considerations mandates that Classification to use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those IPs at high risk of being sexually victimized from those at high risk being sexually abusive. "Housing, bed, work, and program assignments should be made to separate incarcerated persons at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Incarcerated persons identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other incarcerated persons and staff. All incarcerated persons identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, incarcerated persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers (28 CFR 115.43; 28 CFR 115.68).</p> <p>Housing and program assignments of a transgender or an intersex incarcerated person shall include individualized consideration for the incarcerated person's health and safety and any related supervisory, management, or facility security concerns</p>

(15 CCR 1050). A transgender or an intersex incarcerated person's views with respect to their own safety shall be given serious consideration.

Lesbian, gay, bisexual, transgender, or intersex incarcerated persons shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is pursuant to a consent decree, legal settlement, or legal judgment (28 CFR 115.42)."

Interview with PREA Compliance Manager indicates that the facility uses information from risk screening during intake to keep IPs from being sexually victimized or being sexually abusive as classification deputies work to give IPs more freedom to work which provides freedom for less restrictive housing.

Interview with Staff Responsible for Risk Screening indicates that in order to keep IPs safe from being sexually victimized or from being sexually abusive, agency/facility uses information from the risk screening during intake to reduce or eliminate victimization, physical violence and sexual abuse.

115.42(b): Classification Policy 508.10 PREA Considerations mandates that Classification use information provided from the screening to ensure the safety of each IP.

Interview with Staff Responsible for Risk Screening indicates that in order to keep IPs safe from being sexually victimized or from being sexually abusive, agency/facility uses information from the risk screening during intake to reduce or eliminate victimization, physical violence and sexual abuse.

115.42(c): Classification Policy 508.10 PREA Considerations mandates that Classification use information provided from the screening to ensure the safety of each IP. Policy mandates Classification provide individual assessments for housing assignments and programming to all LGBTQ+ IP.

Interview with PREA Compliance Manager indicates that the agency considers whether the placement for housing and program assignments for transgender or intersex IPs based upon primary gender organs to ensure they are safe in their housing assignments.

Interview with 2 transgender/intersex IPs indicate that Male/Female staff sometimes announce their presence with entering their housing units and both state they have never been naked in full view of Male/Female staff while housed at Marin CJ.

115.42(d): Classification Policy 508.6.1 Periodic Classification Reviews Policy mandates that "Housing and program assignments for each transgender or intersex incarcerated person shall be reassessed at least twice each year to review any threats experienced by the person (28 CFR 115.42).

Incarcerated person risk levels shall be reassessed when required due to a referral, request, incident of sexual abuse, or receipt of additional information that increases the incarcerated person's risk of sexual victimization or abusiveness (28 CFR 115.41)."

Interview with PREA Compliance Manager indicates that transgender or intersex IPs are reassessed every 30 days to review any threats to safety experienced by the IP.

Interview with Staff Responsible for Risk Screening indicates that placement and programming assignments for each transgender or intersex IP is reassessed at least every 30 days to review any threats to safety experienced by the IP.

	<p>115.42(e): Classification Policy 508.6.1 Periodic Classification Reviews Policy mandates that "Housing and program assignments for each transgender or intersex incarcerated person shall be reassessed at least twice each year to review any threats experienced by the person (28 CFR 115.42). Incarcerated person risk levels shall be reassessed when required due to a referral, request, incident of sexual abuse, or receipt of additional information that increases the incarcerated person's risk of sexual victimization or abusiveness (28 CFR 115.41)."</p> <p>Interview with PREA Compliance Manager indicates that transgender or intersex IPs views, with respect to his or her own safety is given serious consideration in placement program assignments.</p> <p>Interview with Staff Responsible for Risk Screening indicates that transgender or intersex inmate views of his or her safety, or giving serious consideration in placement and programming assignments.</p> <p>Interview with 2 transgender and Intersex Inmates indicates that Male/Female staff sometimes announce their presence when entering the housing area.</p> <p>115.42(f): Agency reports that Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.</p> <p>Interview with PREA Compliance Manager indicates that Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. All showers in the Marin County Jail facility are separate showers with doors.</p> <p>Interview with Staff Responsible for Risk Screening indicates that Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. All showers in the Marin County Jail facility are separate showers with doors.</p> <p>Interview with Transgender/Intersex Inmates indicates that Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. All showers in the Marin County Jail facility are separate showers with doors.</p> <p>115.42(g): Agency reports that the agency does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.</p> <p>Interview with PREA Coordinator indicates that there are no dedicated facilities, units or wings solely on the basis of identification status.</p> <p>Interview with PREA Compliance Manager indicates that there are no dedicated facilities, units or wings solely on the basis of identification status.</p> <p>Interview with Transgender/Intersex/Gay/Lesbian Inmates indicates that there are no dedicated facilities, units or wings solely on the basis of identification status.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.42.</p>
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115.43	Protective Custody
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	<div data-bbox="256 118 959 152" data-label="Section-Header"><p>Auditor Overall Determination: Meets Standard</p></div> <div data-bbox="256 197 542 230" data-label="Section-Header"><p>Auditor Discussion</p></div> <div data-bbox="256 271 1481 2051" data-label="Text"><p>115.43(a): Classification Policy 508.10 PREA Considerations mandates that "Housing, bed, work, and program assignments should be made to separate incarcerated persons at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Incarcerated persons identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other incarcerated persons and staff. All incarcerated persons identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, incarcerated persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers (28 CFR 115.43; 28 CFR 115.68).</p><p>Housing and program assignments of a transgender or an intersex incarcerated person shall include individualized consideration for the incarcerated person's health and safety and any related supervisory, management, or facility security concerns (15 CCR 1050). A transgender or an intersex incarcerated person's views with respect to their own safety shall be given serious consideration.</p><p>Lesbian, gay, bisexual, transgender, or intersex incarcerated persons shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is pursuant to a consent decree, legal settlement, or legal judgment (28 CFR 115.42)."</p><p>Policy mandates involuntary segregated housing (Protective Custody No-Mix) is to be used only after review of all available housing alternatives has shown that there are no other means of protecting the IP.</p><p>Agency reports that no IPs at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment:</p><p>Interview with Facility Commander indicates that agency policy prohibits, placing IPs at high risk for sexual victimization, or who have alleged sexual abuse and involuntary segregated housing, in lieu of other housing areas, unless an assessment has been determined, there are no available alternative means of separation from potential abusers. IP at high risk are placed in protective custody housing, or risk factor housing with access to programs.</p><p>115.43(b): Agency reports that IPs 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: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.</p><p>Interview with Staff who Supervise Inmates in Segregated Housing indicates that IPs are not placed in segregated housing for protection from sexual abuse, or after having alleged sexual abuse. Should IPs require protection from sexual abuse, or after having alleged sexual abuse they may be placed in special housing units or restricted</p></div>
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housing units. Tablets, out of cell opportunities and IP request forms. Agency there are no IPs are housed in Segregated Housing for risk of sexual victimization/who allege to have suffered sexual abuse.

Interview with Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) indicates that should the facility restrict programs, education, or work opportunities, the facility documents the opportunities that have been limited, the duration of the limitations, and the reasons for such limitations. If IP moved to restricted housing, they only have access to tablets and request forms. They have access to prisoner services and IP Coordinator. No IPs are housed in Segregated Housing for risk of sexual victimization/who allege to have suffered sexual abuse.

115.43(c): Classification Policy 508.10 PREA Considerations mandates and Agency reports that In the past 12 months, no IPs at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement.

Interview with the Facility Commander indicates that IPs at high risk for sexual victimization or who have alleged sexual abuse are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Should an IP be housed for high risk of sexual victimization or who have alleged sexual abuse, they would be housed for only a matter of days, if at all. There currently are no IPs being housed in segregated housing for that purpose.

Interview with Staff who Supervise Inmates in Segregated Housing indicates that IPs may be placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged on a case by case basis for a period of hours or days per classification.

Agency and staff who supervise IPs in Segregated housing reported that no IPs housed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) - Q: 3

115.43(d): Classification Policy 508.10 PREA Considerations mandates that if an involuntary segregated housing assignment is made pursuant to Standard provision 115.43 (a) of this section, the facility shall clearly document: (1) The basis for the facility's concern for the IP safety;and

(2) The reason why no alternative means of separation can be arranged.

(3) The reason why/if the 30 -day involuntary segregation housing period is required to to be extended,

(4) Any restriction and/or limitations of access to programs, privileges, education, or work opportunities have been imposed, including the duration and reason for the restrictions.

Agency reports that no IPs at risk of sexual victimization were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged.

115.43(e): Classification Policy 508.6.1 Periodic Classification Reviews mandates that "The classification deputy shall review the status of all special management incarcerated persons who have been incarcerated in the facility for more than 30

days, Additional reviews should occur each 30 days thereafter. The review should examine changes in the incarcerated person's behavior or circumstances and should either raise, lower, or maintain the classification status (28 CFR 115.41). All changes in classification status will be processed by the Classification Deputy and reviewed by the Classification Sergeant.

Housing and program assignments for each transgender or intersex incarcerated person shall be reassessed at least twice each year to review any threats experienced by the person (28 CFR 115.42),"

Interview of staff who supervise IPs in segregated housing indicates that what is an IP is assigned to involuntary segregated housing, classification reviews the IP circumstances every 30 days to determine if continue placement. Involuntary secured housing as needed. Agency reports there have been no IPs involuntarily housed in segregated housing over the past 12 months for risk of sexual victimization/who allege to have suffered sexual abuse.

Classification Policy 508.6.1 Periodic Classification Reviews mandates that "The classification deputy shall review the status of all special management incarcerated persons who have been incarcerated in the facility for more than 30 days. non-compliant with this Standard provision 115.43(e)-1, which mandates inmates housed in segregated housing is to be afforded such a review every 30 days to determine whether there is a continuing need for separation from the general population. Agency to amend Policy 508.6.1 narrative to meet The PREA Standard provision mandate.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.43(e) and corrective action is required.

Corrective Action Recommended:

115.43(e): Classification Policy 508.6.1 Periodic Classification Reviews mandates that "The classification deputy shall review the status of all special management incarcerated persons who have been incarcerated in the facility for more than 30 days, non-compliant with this Standard provision 115.43(e)-1, which mandates inmates housed in segregated housing is to be afforded such a review every 30 days to determine whether there is a continuing need for separation from the general population.

1. Agency to amend Policy 508.6.1 narrative to meet The PREA Standard provision mandate.

Corrective Action Completion 12/12/2024 :

115.43(e): On 12/12/2024, Agency provided auditor with corrected Classification Policy amendment to Section 508.6.1 Periodic Classification Reviews which mandates:

	<p>"The classification deputy shall review the status of all special management incarcerated persons who have been incarcerated in the facility within 30 days. Additional reviews should occur each 30 days thereafter. The review should examine changes in the incarcerated person's behavior or circumstances and should either raise, lower, or maintain the classification status (28 CFR 115.41). All changes in classification status will be processed by the Classification Deputy and reviewed by the Classification Sergeant."</p> <p>In addition, IP Review Tool, PREA Education forms and 30-day Reassessment Documentation was uploaded to the Supplemental File to verify compliance with the Classification policy.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.43(e) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.43.</p>
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115.51	Inmate reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.51(a): Policy 503 Handbook and Orientation establishes procedures allowing for multiple internal ways for IP to report privately to agency officials about: Sexual abuse or sexual harassment; Retaliation by other IP or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>"In addition to English, orientation information will be provided in the most commonly used languages for the incarcerated person population.</p> <p>The Captain should consider enlisting the assistance of volunteers who are qualified and proficient in both English and the language in which they are providing translation assistance to translate the orientation information. Use of outside translation sources may also be considered.</p> <p>Interpretive services will be provided to incarcerated persons who do not speak English or any of the other languages in which the orientation information is available."</p> <p>Incarcerated persons who cannot read, are visually impaired, or have intellectual, psychiatric, or speech disabilities, or limited reading skills shall have the materials read to them by a staff member or presented to them using audible recorded media (28 CFR 115.16).</p> <p>Incarcerated persons who have hearing disabilities shall be provided with interpretation services. Reasonable efforts should be made by the staff to assist the incarcerated person in understanding the information. "Interpretive services will be</p>

provided to incarcerated persons who do not speak English or any of the other languages in which the orientation information is available.

A written and signed acknowledgment of the orientation and receipt of the handbook should be maintained in the incarcerated person's permanent file (28 CFR 115.33)."

Agency to provide the following to the PREA Auditor through the Supplemental File

1. Agency to provide auditor via Supplemental File with readable photographs of the PREA posters affixed to the housing unit shower doors in both English and Spanish

2. Agency to provide auditor via Supplemental File documented list of all areas throughout the facility where NO means NO preposteroco85x11white in both English and Spanish are located throughout the facility.

115.51(b): PREA 606.5 Reporting Sexual Abuse, Harassment and Retaliation provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of MCSO through Community Violence Solutions Rape Crisis Center. Inmates that do not speak English may request a translator upon contacting the Community Solutions Rape Crisis Center. Hearing impaired IP shall be provided a TDD machine and may dial the Community Violence Solutions Rape Center using the direct telephone number provided in the inmate handbook and PREA signage. Signage is posted throughout the facility advising that IP calls to these numbers are confidential and not subject to monitoring, however, information will be forwarded to the authorities in accordance with mandatory reporting laws. Agency reports they do not house inmates detained solely for civil immigration.

Agency provided auditor with copy of Community Violence Center Operational Agreement which is effective 10/1/22 through 9/30/25.

Interview with PREA Compliance Manager indicates that at least one way for IPs to report abuse or harassment to a public or private entity or office that is not part of the agency is IPs have access to phone trees in their housing unit to report sexual abuse and PREA violations.

Interview with Inmate Interview Questionnaire indicates that if an IP wanted to report sexual abuse or sexual harassment that happened to them or someone else, they would report to the CVS hotline #72, housing staff, medical, mental health, PREA Coordinator, grievance via medical/MH mailbox and can submit reports anonymously.

On 8/1/24, during the Onsite Audit, auditor contacted Community Violence Solution Executive Director and explained the difficulty when auditor attempted to conduct outside confidential support services. When doing so, auditor utilized the Community Violence Solution (CVS) Hotline number #72 in Intake and was immediately connected to the answering service. Answering service indicated the Advocate on duty was on another line, took my contact number for return call by the Advocate.

Auditor awaited over 30 minutes and no call was returned. Auditor then called the Business office and was provided the Director and Executive Director direct contact number to resolve the issue. Auditor left return call-back number to both Director and Executive Director to discuss the issues the auditor encountered. On 8/2/24 the Executive Director returned the call and the issues that auditor encountered were discussed. Executive Director requested written procedures when auditors conduct mock reporting via the Marin CJ Hotline to CVS which is reported to the appropriate staff and leadership for investigation and would share this information with all

Advocates who respond to reporting and emotional support phone lines. Director Peterson responded that IPs can anonymously report sexual abuse to CVS. No 3rd Party Reporting accepted or sent to the Agency. On 8/2/24, auditor provided the requested testing procedures mandated by the PREA Resource Center in order for CVS Advocates can be briefed and trained. the Director also informed auditor they will not accept 3rd Party reporting to be sent to the agency but do accept anonymous reporting for emotional support. On 8/14/24 auditor contacted the Executive Director again and was informed that the testing procedures were received and shared with all CVS advocates. At the end of the phone call (6:15PM) with the Executive Director, auditor called Community Violence Solutions Hotline (800) 670-7273 provided in the IP Handbook to initiate a sexual abuse mock report to Community Violence Solutions Crisis Line. The IP Handbook indicates that the call would be forwarded to the authorities in accordance with mandatory reporting laws. Calls are not monitored and are confidential. Auditor's call was met with an answering service, who connected me with the Community Violence solution Advocate on Duty. The Advocate agreed to report the Mock sexual abuse reporting call to the Marin County Jail Custody Staff member.

On 08/14/24, the Marin County Jail PREA Coordinator was informed of the following by Sergeant Cook of the Custody Division: "at approximately 1830 hours, a Sergeant from Marin County Custody Division received a phone call from Community Violence Solutions regarding a "mock" PREA call. During this call, a representative told me an Incarcerated Person had reached out them to call on their behalf regarding a sexual assault that had occurred in the facility. This call was first sent to Booking and then forwarded to me in X70's office. Just keeping you guys posted that this call did go through and was routed appropriately."

The PREA Coordinator immediately passed this information to the auditor verifying that the Mock call by the Community Violence Solution Advocate was received by Marin County Jail Custody staff and acted upon immediately.

115.51(c): PREA Policy 606.5 mandates that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Information is immediately documented and immediate supervisor is notified. Investigation is to commence immediately. Report shall be immediately be provided to supervisor notification, who will notify matter to a sexual abuse investigator Interview with Random Sample of Staff indicates that when an IP alleges sexual abuse or sexual harassment, he/she may do so verbally, in writing, anonymously, and from 3rd parties. All staff document verbal reports as soon as possible from the time of receipt

Interview Inmate Interview Questionnaire Indicates IPs are able to make reports of sexual abuse or sexual harassment either in person or in writing.

115.51(d): PREA Policy 606 mandates that there is no requirement for any employee to use the chain of command in reporting a violation of sexual abuse or sexual harassment. Staff is informed of private reporting methods via comprehensive education and briefing training.

PREA Policy 606 mandates any employee, agency representative, volunteer or contractor who becomes aware of an incident of sexual abuse, sexual harassment, or

retaliation against incarcerated persons or staff shall immediately notify a supervisor, who will forward the matter to a sexual abuse investigator (28 CFR 115.61). Staff may also privately report sexual abuse and sexual harassment of incarcerated persons (e.g. report to the Captain) (28 CFR 115.51; 15 CCR 1029).

Interview with Random Sample of Staff indicates that staff can privately report sexual abuse and sexual harassment of IPs via the PREA Coordinator, Human Resources, Detectives from the Criminal Division.

Interview with Random Sample of Staff indicates that IPs can privately report sexual abuse and sexual harassment verbally, in writing, anonymously, and from 3rd parties. Verbal reports are documented immediately upon receipt.

Interview with Inmate Interview Questionnaire indicates that if there is a need to report any sexual abuse that happened to them, they would do so via cvs Hotline, kite to staff, medical.

PREA AUDIT SITE REVIEW:

SIGNAGE:

During the site review, auditor observed large PREA posters in both English and Spanish located in each housing unit on the shower doors for both upper and lower floors. Auditor also observed 1 large poster in Intake, Small No means NO poster in medical, laundry room, entrance Lobby, and 2 PREA posters in the visiting area hallways and 1 informational poster as visitors come off the visiting elevator.

TESTING INTERNAL REPORTING METHODS FOR CONFINED PERSONS:

Informal conversation with housing deputy indicates IPs can request grievance form from housing deputy and return to housing deputy or Shift Sergeant for processing.

IPs can report to any staff, volunteer, or contractor, medical or mental health staff, submit a grievance, submit a sick call slip or report to the PREA Coordinator. IP can also place a completed grievance form in the locked Medical / Mental Health mailbox available in each housing unit. Locked Medical / Mental Health mailboxes are cleared by the end of each shift by Medical/MH staff, sorted and PREA related grievance forms or kites are provided to the Shift Sergeant or Shift Lieutenant at the end of each shift for processing. Electronic reporting (Kiosk, tablet or computer) is not a internal reporting form available to IPs as they are not viable reporting methods. The housing unit kiosk is only available for ordering staple items, tablets do not have PREA reporting forms available.

PROCESSES FOR SENDING AND RECEIVING MAIL (MAIL DROP BOXES/MAILROOM):

Outgoing Mail - Japanese place mail in housing unit mail box which is collected directly from IP in each housing unit. Upon Deputy break or end of shift, the housing deputy moves mail to the (Movement Relief Deputy) MRD office on Housing level. The MRD office stamps the envelopes and does not open them. Stamped envelopes are placed in giant bin and moved to lobby office. In the morning, mail is collected by USPS.

INCOMING MAIL - Legal mail is dropped off by DA office, Private Lawyer, etc. Legal Mail is given to IP in view of deputy and opened by IP.

REGULAR MAIL - Mail goes through 3rd Party called Pigeonly, who opens and scans

the mail. Custody staff goes through the scanned mail returned from Pigeonly, where staff reviews and determines if mail is approved to be sent or rejected. If rejected, scanned mail is returned to the Agency with QR code (No Originals) for Agency staff to review a second time. Once 2nd review is completed,, mail is returned to sender. If mail was initially approved, mail is provided to IP.

RECORD STORAGE - During the Onsite Audit, the auditor, accompanied by the PREA Compliance Manager gained access to the only Locked Documents Storage Unit. The unit was a large locked closet secured and locked with the PREA Compliance Manager and the PREA Coordinator who maintains the security. Within the Locked Storage unit (located in the Sheriff's Training Room off the Administration Hallway) Logs, investigations, grievances.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.51(a) and corrective action is required.

Corrective Action Recommended:

115.51(a): Agency to provide the following to the PREA Auditor through the Supplemental File:

1. Agency to provide auditor via Supplemental File with readable photographs of the PREA posters affixed to the housing unit shower doors in both English and Spanish
2. Agency to provide auditor via Supplemental File documented list of all areas throughout the facility where NO means NO preaposteroco85x11white in both English and Spanish are located throughout the facility.

Corrective Action Completion 10/22/24 :

115.51(a): 10/22/24 - Agency provided auditor with the following poster photos which identifies multiple internal ways for inmates to privately report sexual abuse, sexual harassment and retaliation by inmates or staff and staff neglect or violation of responsibilities that may have contributed to such incidents:

IMG 8229.JPG

IMG 8230.JPG

MCJ PREA Signage Location.docx - Identifies NO means NO Poster locations throughout the facility

The agency/facility has met the requirements of Standard provision(s) 115.51(a) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.51.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.52(a): PREA Grievances 609 mandates that Any grievance submitted by an IP alleging inmate sexual abuse or imminent risk of inmate sexual abuse shall immediately be withdrawn from the routine IP grievance process. Rather, these grievances will be considered a complaint or IP sexual abuse and not subject to any rules, procedures or timelines regarding routine IP grievances. All staff receiving such grievances alleging IP sexual abuse, shall immediately direct them to a Supervisor. The Supervisor shall immediately initiate the appropriate sexual abuse response.</p> <p>115.52(b): Grievance Policy 606, PREA Policy 609 and IP Handbook PREA Section mandates that grievances alleging sexual abuse are not subject to timeline restrictions placed on normal grievances. Policy does not require IP to use an informal grievance process or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. The IP handbook informs that they can report sexual abuse or sexual harassment to any staff member, contractor or volunteer, medical staff, mental health staff, or 3rd party. The IP is required to check off reporting information to verify they have been notified of this information.</p> <p>115.52(c): Grievance Policy 606, PREA Policy 609 and IP Handbook PREA Section mandates that grievances alleging sexual abuse are not subject to timeline restrictions placed on normal grievances. Policy does not require IP to use an informal grievance process or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. The IP handbook informs that they can report sexual abuse or sexual harassment to any staff member, contractor or volunteer, medical staff, mental health staff, or 3rd party. The IP is required to check off and sign the reporting information on the PREA Inmate Education document they acknowledge receipt through signature in Intake, and provided a copy, to verify they have been notified of this information.</p> <p>Agency reports that each housing unit possesses locked POD medical mailboxes which has available grievance forms which an IP can obtain without requesting the forms from staff and place the completed forms in the box without giving the forms to staff for processing. The contents of the boxes are retrieved by shift Sergeants each shift. This process allows an IP to submit a grievance alleging sexual abuse without submitting it to staff member who is the subject of the complaint or requires that an IP grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Policy 503 Handbook & Orientation indicates "A written and signed acknowledgment of the orientation and receipt of the handbook should be maintained in the incarcerated person's permanent file (28 CFR 115.33.3)."</p> <p>1. Agency to provide auditor with complete copy of the complete IP Handbook and signed acknowledgement of the IP Orientation form and intake roster for IPs who were booked into and housed in the Marin County Jail facility between 7/29/24 and 8/2/24 (during the onsite audit).</p>

2. Agency to upload the requested documentation to the Supplemental File.

115.52(c)-2. The Pre-Audit Questionnaire states that Each housing unit possesses locked POD mailboxes which has available grievance forms which an IP can obtain without requesting the forms from staff and place the completed forms in the box without giving the forms to staff for processing. During the Onsite Audit, auditor was unable to locate grievance forms available to IPs without obtaining or requesting grievance forms from staff.

1. Agency to explain how IPs can obtain grievance forms without requesting grievance forms from staff or giving the forms to staff for processing.

2. Agency to respond through the Supplemental File

115.52(d): Grievance Policy 606, PREA Policy 609 and IP Grievances 5-2023 to 4-2024 mandates that all grievances received regarding an alleged sexual abuse or sexual harassment will be investigated promptly and a merit to the allegation or any portion of the allegation will be completed within 90 days of the filing date of the grievance. If a merit to the allegation has not been completed within 90 days, the Sheriff's Office will notify the inmate in writing that there has been an extension and the letter will contain the new projected merit date.

The Lieutenant shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The Lieutenant may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the incarcerated person shall be notified and provided a date by which a decision will be made.

Agency reports that in the past 12 months, Agency provided auditor with 4 grievances which were filed that alleged sexual abuse. In the past 12 months. no requested extension of the 90-day grievance period.

Only 1 IP was housed during the Onsite Audit who Reported a Sexual Abuse. Said IP refused to be interviewed by auditor.

115.52(e): Policies 609 Grievances, 606 PREA and IP Education PREA in English were provided to auditor which identified that Incarcerated persons may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all incarcerated person requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).

Policy mandates third parties, including fellow incarcerated persons, staff members, family members, attorneys, and outside advocates, are permitted to assist incarcerated persons in filing such grievances and to file such grievances on behalf of incarcerated persons if the incarcerated person agrees to have the grievance filed on the person's behalf. Staff members who receive a grievance filed by a third party on behalf of an incarcerated person shall inquire whether the incarcerated person wishes to have the grievance processed and shall document the incarcerated person's decision.

Agency reports that no grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline.

SIGNAGE - During the Onsite Audit, auditor observed "NO Means NO" Posters throughout the facility entry lobby, housing units, visiting hallways, work areas, etc. These posters provided both IPs and 3rd Party's information on Right to Report, How to Report and Victim Support Services. The 3rd Party narrative provides a "family member, friend, legal counsel, anonymous reporting or anyone else outside the facility. They can report on an IPs behalf by calling (415)-473-6655."

TESTING 3RD PARTY REPORTING - On 8/16/24 at 1:23PM, auditor began initiation of a Mock 3rd Party Call to the number identified on the No Means No Poster for 3rd Party Calling. The initial call went to Prisoner Services phone, however, the staff member was not available and auditor was referred to the Shift Sergeant, who referred me to Booking Sgt as he was very busy at the moment. The Booking Sergeant was not available at the time of the referral and the custody staff member took my call-back number for the Booking Sergeant to call me back to initiate the 3rd Party Call. On 8/16/24 at 2:26pm, I received a return call from the Custody Sergeant who informed me he will take the Mock 3rd Party Call. He indicated that if a family member or other 3rd Party called this line to indicate that a family member reported sexual abuse, the protocol would be:

Record type of PREA incident from the caller

Write the incident narrative report

Conduct reclassification of IP if necessary

Initiate an investigation.

In this case, since it is a Mock 3rd Party reporting, he will write the narrative of what is occurring and provide the Mock 3rd Party call narrative to the PREA Coordinator and PREA Compliance Manager who will in turn inform the PREA auditor that the call went through and initial investigation has been initiated. Auditor awaits e-mail which verifies that the Mock 3rd Party call has gone through the required processing. Verification e-mail received on 8/15/24.

115.52(f): 609.4.1 Grievance Policy mandates the supervisor shall refer the grievance to the Lieutenant, who will investigate and issue a final decision within five calendar days and PREA Policy 606 mandates that any grievance submitted by an IP, alleging IP sexual abuse or imminent risk of IP sexual abuse shall immediately be withdrawn from the routine IP grievance process. Rather, these grievances will be considered a complaint of IP sexual abuse and not subject to any rules, procedures or timelines regarding routine IP grievances. All staff receiving such grievances alleging IP sexual abuse shall immediately direct them to a Supervisor. The Supervisor shall immediately initiate the appropriate sexual abuse response. Agency uploaded 4 grievances with final decision as required for review.

If an incarcerated person believes the person or any other incarcerated person is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the incarcerated person and shall provide an initial response within 48 hours.

Agency reports that no emergency grievances alleging substantial risk of imminent sexual abuse were filed in the past 12 months.

Agency reports that of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days.

115.52(g): Grievance Policy 609.4 mandates that Incarcerated Persons (IPs) may be disciplined for filing a false grievance related to alleged sexual abuse only when it is determined that the incarcerated person filed the grievance in bad faith. Agency reports that in the past 12 months, no inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.52(c)-1, 115.52(c)-2, 115.52(e), and corrective action is required.

Corrective Action Recommended:

115.52(c)-1: Policy 503 Handbook & Orientation indicates "A written and signed acknowledgment of the orientation and receipt of the handbook should be maintained in the incarcerated person's permanent file (28 CFR 115.33.3)."

1. Agency to provide auditor with complete copy of the complete IP Handbook and signed acknowledgement of the IP Orientation form and intake roster for IPs who were booked into and housed in the Marin County Jail facility between 7/29/24 and 8/2/24 (during the onsite audit).
2. Agency to upload the requested documentation to the Supplemental File.

115.52(c)-2: During the Onsite Audit, auditor was unable to locate grievance forms available to IPs without obtaining or requesting grievance forms from staff.

1. Agency to explain how IPs can obtain grievance forms without requesting grievance forms from staff or giving the forms to staff for processing.
2. Agency to respond through the Supplemental File

115.52(e): Auditor awaits e-mail which verifies that the Mock 3rd Party call has gone through the required processing.

	<p><u>Corrective Action Completion 10/22/24 :</u></p> <p>115.52(c)-1: RESPONSE: 10/22/24 - PREA Compliance Mgr response is as follows: In regard to 115.52(c)-2, an Incarcerated Person can obtain a grievance form from any staff member and is not required to explain the circumstances for the grievance. Grievance forms are not left out in the day room due to misuse of the forms by Incarcerated Persons. Incarcerated Persons can turn in a grievance to any staff member including medical and mental health or submit the grievance into one of the lock boxes located in the dayroom of each pod. Incarcerated Persons in Restrictive Housing can utilize their intercom to request to speak to a staff member they feel comfortable turning a grievance form into.</p> <p>115.52(c)-2: RESPONSE: 10/22/24 - PREA Compliance Mgr response is as follows: In regard to 115.52(c)-2, an Incarcerated Person can obtain a grievance form from any staff member and is not required to explain the circumstances for the grievance. Grievance forms are not left out in the day room due to misuse of the forms by Incarcerated Persons. Incarcerated Persons can turn in a grievance to any staff member including medical and mental health or submit the grievance into one of the lock boxes located in the dayroom of each pod. Incarcerated Persons in Restrictive Housing can utilize their intercom to request to speak to a staff member they feel comfortable turning a grievance form into.</p> <p>115.52(e): 8/15/24 - Auditor informed by PREA Coordinator that the 3rd Party call was received on 8/15/24 and went through the required contacts for processing.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.52(c)-1, 115.52(c)-2, 115.52(e), completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.52.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.53(a): Policy 604 Foreign Nationals and Diplomats mandates Policy provides IP with access to Community Violence Solutions Rape Crisis Center through hot-line on incarcerated persons' telephones. The direct phone number is provided in the PREA signage and POD Rules sheet. Signage and POD Rules sheets. Signage is posted in all facility in both English and Spanish, advising that inmate calls to the Rape Crisis Center is confidential, toll-free and not monitored. Posters do not provide contact numbers for immigration service agencies for persons detained solely for civil immigration purposes as discussed in Policy 414. No person shall be contacted, detained or arrested solely on the basis of his or her immigration status. Policy 414</p>

indicates that "Requests to detain an IP beyond his/her normal release date shall be declined unless ICE presents a judicial warrant supported by probable cause. Policy CUS 604 Foreign Nationals and Diplomats mandates that a document is provided to all foreign nationals at Booking and provides the mandatory notification circumstances, failure to warn and process regarding the mandatory notification placed on the Facility per California code 834 c. Upon arrest and booking or detention for more than two hours of a known or suspected foreign national, every Peace Officer (per PC 834c) shall advise the foreign national, without unnecessary delay, that he or she has a right to communicate with an official from the consulate of his or her country. Policy GO 414 Immigration Violations (Trust Act Implementation 8/15/17) mandates that "No person shall be contacted, detained, or arrested solely on the basis of his or her immigration status."

PREA Policy 606 and Immigration Policy 414 Immigration Violations mandates that IPs are provided w/access to Community Violence Solutions Rape Crisis Center through hotline on IP telephones. The direct number is provided in the PREA Signage and POD Rules sheet. Signage is posted in all PODs in English and Spanish, advising that IP calls to the Rape Crisis Center are confidential, toll-free and not monitored. Posters do not provide contact numbers for immigration service agencies Policy GO 414.7.1 mandates no individual shall be held based solely on a federal immigration detainer. Policy CUS 604 mandates individuals of their right to communicate with an official from the consulate of his or her country.

Interview with IPs using Inmate Interview Questionnaire indicates that few IPs were aware of any services available outside of the facility for dealing with sexual abuse if they needed it. Only 2 IPs acknowledged they could use Community Violence Solutions for emotional Support hotline as call is toll free, confidential and not monitored by the agency.

Interview with IPs who Reported a Sexual Abuse. There was only 1 IP who reported sexual abuse housed at the facility. Said IP refused an interview by auditor.

SIGNAGE:

During the site review, auditor observed large PREA posters in both English and Spanish located in each housing unit on the shower doors for both upper and lower floors. Auditor also observed 1 large poster in Intake, Small No means NO poster in medical, laundry room, entrance Lobby, and 2 PREA posters in the visiting area hallways and 1 informational poster as visitors come off the visiting elevator.

TESTING ACCESS TO OUTSIDE EMOTIONAL SUPPORT SERVICES:

On 8/28/24, auditor conducted the Community Violence Solutions (CVS) emotional support call by using the Hotline #72 in B-Pod Housing Unit. Auditor was connected with the Community Violence Solutions Crisis Line answering service. The answering service operator took my information and transferred my call to the Advocate on duty, who answered within 3 minutes. After explaining my purpose as the PREA Auditor at Marin CJ Incarcerated Person (IP) housing unit hotline phone, I asked the Advocate for the process that is initiated when an IP calls to request emotional support and counseling when an IP has suffered a history of sexual abuse. The Advocate was very knowledgeable and informed the auditor her name, position, and that the crisis line call was private and confidential. Counseling therapy can be made

available either through phone or mail. An advocate is assigned and IP is scheduled for counseling sessions through Mental Health services and tracked with the confidential Crisis Line. When auditor asked if the Advocate can have face to face access for the counseling sessions, the Advocate indicated that all counseling sessions are conducted through the Crisis Line and Mental Health. Advocates do not have access to the facility to provide the emotional support counseling.

PROCESSES FOR SENDING AND RECEIVING MAIL (MAIL DROP BOXES/ MAILROOM):

Outgoing Mail - Japanese place mail in housing unit mail box which is collected directly from IP in each housing unit. Upon Deputy break or end of shift, the housing deputy moves mail to the (Movement Relief Deputy) MRD office on Housing level. The MRD office stamps the envelopes and does not open them. Stamped envelopes are placed in giant bin and moved to lobby office. In the morning, mail is collected by USPS.

INCOMING MAIL - Legal mail is dropped off by DA office, Private Lawyer, etc. Legal Mail is given to IP in view of deputy and opened by IP.

REGULAR MAIL - Mail goes through 3rd Party called Pigeonly, who opens and scans the mail. Custody staff goes through the scanned mail returned from Pigeonly, where staff reviews and determines if mail is approved to be sent or rejected. If rejected, scanned mail is returned to the Agency with QR code (No Originals) for Agency staff to review a second time. Once 2nd review is completed,, mail is returned to sender. If mail was initially approved, mail is provided to IP.

115.53(b): PREA Policy 606.5 mandates that Community Violence Solutions Rape Crisis Center signage is posted in all PODs which provides a phone Hotline #72 number for IP to have direct access to the Agency. The signage indicates that calls made to the Rape Crisis Center are confidential and not monitored by the agency. The hotline number is also included in the PREA IP Education form provided at intake and which IP are provided with a copy to keep.

IP's are provided w/access to Community Violence Solutions Rape Crisis Center through hotline on IP telephones. The direct number is provided in the PREA Signage and POD Rules sheet. Signage is posted in all PODs in English and Spanish, advising that IP calls to the Rape Crisis Center are confidential, toll-free and not monitored.

Interview with IPs using Inmate Interview Questionnaire indicates that during interviews, when questioned, few IPs (15 Random & 13 Targeted) are aware of Community Violence Solutions (CVS) hotline. Posters are available throughout the facility and on shower doors in every housing unit both 1st and 2nd floors in both English and Spanish. No Means No posters are available within the facility to include work areas and visitor lobby which provides phone numbers to CVS hotline for both reporting sexual abuse and need for Emotional Support.

Interview with IPs who Reported a Sexual Abuse. There was only 1 IP who reported sexual abuse housed at the facility. Said IP refused an interview by auditor.

115.53(c): Agency provided auditor with copy of Community Violence Center Operational Agreement which is effective 4/26/23 through 4/25/23. Auditor requested Agency provide updated MOU agreement as the current Operational Agreement was non-compliant with Standard provision 115.53(c).

	<p>On 8/1/24 Agency provided auditor with copy of Community Violence Solutions Rape Crisis Center Operational Agreement which remains in effect from 9/30/2024 to 4/15/2025, through the PREA Audit process.</p> <p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.53.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.54(a): Grievance Policy 609 mandates that All third parties including, other IP, staff members, family members, attorneys, and outside advocates may report on behalf of an IP, all allegations of of sexual abuse or harassment through the Sheriff's Office website by downloading, completing, and submitting a citizen's complaint form. A PREA related citizen's complaint form submitted anonymously will all be accepted. If an IP declines third party assistance in filing a grievance alleging sexual abuse, the Sheriff's Office will document the IP's decision to decline in the management section of CMS. Additionally, posters are posted in both English and Spanish located at the jail entrance lobby and visiting level, accessible to visitors. The PREA and No Means NO and posters provide opportunities available to the public and visitors to report suspicious or knowledge of sexual harassment or sexual misconduct in the Marin County Jail. Posters indicates that staff members, volunteers, supervisors, administrators can accept reports related to sexual abuse, sexual harassment, and sexual misconduct. Posters also provides a telephone number to the Marin County Jail to report to a Sergeant or through the Sheriff's Office website at www.marinsherff.org.</p> <p>The Sheriff's Office provides posters in both English and Spanish located at the jail entrance lobby and visiting level, accessible to visitors. The posters provide opportunities available to the public and visitors to report suspicious or knowledge of sexual harassment or sexual misconduct in the Marin County Jail. The poster indicates that staff members, volunteers, supervisors, administrators can accept reports related to sexual abuse, sexual harassment, and sexual misconduct. The poster also provides a telephone number to the Marin County Jail to report to a Sergeant or through the Sheriff's Office website at www.marinsheriff.org.</p> <p>SIGNAGE:</p> <p>During the site review, auditor observed large PREA posters in both English and Spanish located in each housing unit on the shower doors for both upper and lower floors. Auditor also observed 1 large poster in Intake, Small No Means NO poster in</p>

	<p>medical, laundry room, entrance Lobby, and 2 PREA posters in the visiting area hallways and 1 informational poster as visitors come off the visiting elevator.</p> <p>TESTING 3RD PARTY REPORTING - On 8/16/24 at 1:23PM, auditor began initiation of a Mock 3rd Party Call to the number identified on the No Means No Poster for 3rd Party Calling. The initial call went to Prisoner Services phone, however, the staff member was not available and auditor was referred to the Shift Sergeant, who referred me to Booking Sgt as he was very busy at the moment. The Booking Sergeant was not available at the time of the referral and the custody staff member took my call-back number for the Booking Sergeant to call me back to initiate the 3rd Party Call. On 8/16/24 at 2:26pm, I received a return call from the Custody Sergeant who informed me he will take the Mock 3rd Party Call. He indicated that if a family member or other 3rd Party called this line to indicate that a family member reported sexual abuse, the protocol would be:</p> <p>Record type of PREA incident from the caller Write the incident narrative report Conduct reclassification of IP if necessary Initiate an investigation.</p> <p>In this case, since it is a Mock 3rd Party reporting, he will write the narrative of what is occurring and provide the Mock 3rd Party call narrative to the PREA Coordinator and PREA Compliance Manager who will in turn inform the PREA auditor that the call went through and initial investigation has been initiated.</p> <p>On 8/16/24 at 6:08 PM, the Custody Sergeant notified the PREA Coordinator, PREA Compliance Manager and PREA Auditor, via e-mail, the following 3rd Party Mock call narrative:</p> <p>"I received a 3rd Party call from Eric Woodford at approximately 1400 hours. Mr. Woodford called the number on the posters outside which was answered and forwarded upstairs to me. Mr. Woodford explained this was a Mock call and he was the reporting party. I advised him if we received a 3rd Party PREA we would take all appropriate action to include taking all information and investigating the report. I advised him a report would be made and forwarded to you. Mt. Woodford's e-mail address is attached to this e-mail. Please let me know if you need any further information.</p> <p>Sergeant Custody Division"</p> <p>On 8/18/24 the PREA Coordinator acknowledged receipt of the 3rd Party Mock call test from the Custody Division.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.54(a).</p>
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	<div data-bbox="256 118 959 152" data-label="Section-Header"><p>Auditor Overall Determination: Meets Standard</p></div> <div data-bbox="256 197 542 230" data-label="Section-Header"><p>Auditor Discussion</p></div> <div data-bbox="256 313 1473 595" data-label="Text"><p>115.61(a): PREA Policy 606.5 mandates that all staff, volunteers and contractors have an affirmative duty to report all allegations or knowledge of sexual abuse or sexual harassment involving IP that take place within Marin County Jail. This mandate includes knowledge or suspicion of retaliation against anyone who reports inmate sexual abuse, cooperates with an investigation believes that a staff member violated their responsibilities and may have contributed to an incident of IP sexual assault or sexual harassment.</p></div> <div data-bbox="256 607 1477 806" data-label="Text"><p>Interview with Random Sample of Staff indicates that Agency requires all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p></div> <div data-bbox="256 815 1469 1097" data-label="Text"><p>TESTING STAFF REPORTING: Auditor conducted an informal interview regarding custody staff reporting methods. Interviewed custody staff indicates that bi-annual training 2023 & 2024 mandates that custody staff is not mandated to report sexual abuse or sexual harassment to members of their direct chain of command. They can also report to HR, PREA Coordinator, PREA Compliance Manager, Shift Sgt, Shift Lt, Investigator, Medical/Mental Health etc. Non-custody staff are trained to either report to security staff, immediate supervisor or Medical/Mental Health.</p></div> <div data-bbox="256 1106 1444 1140" data-label="Text"><p>Auditor conducted an informal interview regarding custody staff reporting methods.</p></div> <div data-bbox="256 1149 1430 1391" data-label="Text"><p>Interviewed custody staff indicates that bi-annual training 2023 & 2024 mandates that custody staff is not mandated to report sexual abuse or sexual harassment to members of their direct chain of command. They can also report to HR, PREA Coordinator, PREA Compliance Manager, Shift Sgt, Shift Lt, Investigator, Medical/Mental Health etc. Non-custody staff are trained to either report to security staff, immediate supervisor or Medical/Mental Health.</p></div> <div data-bbox="256 1429 1469 1588" data-label="Text"><p>115.61(b): PREA Policy 606.5 mandates that apart from reporting to designated supervisors or managers, staff is prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p></div> <div data-bbox="256 1597 1444 1715" data-label="Text"><p>Interview with Random Sample of 9 Staff indicates that the agency/facility policy or procedure for reporting any information to an IP sexual abuse is to report to immediate supervisor, shift Sergeant, PREA Coordinator, etc.</p></div> <div data-bbox="256 1751 1466 1995" data-label="Text"><p>115.61(c): PREA Policy 606.5 mandates "Incarcerated persons may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all incarcerated person requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).</p></div> <div data-bbox="256 2004 1466 2080" data-label="Text"><p>Rape crisis counselors and medical and mental health staff are considered mandated reporters.</p></div>
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	<p>All inmates must be informed of their duty to report allegations of inmate sexual assault or sexual harassment, and the limitations of confidentiality that result, at the initiation of services. Subsequently, they shall, as required by law, report all of the following disclosures made by inmates:</p> <ul style="list-style-type: none"> (a) Any threat to kill or injure themselves (b) Any threat to kill or injure another (c) Any threat of sexual violence toward another" <p>Interview with Medical and Mental Health Staff indicates that prior to intake and booking into the facility, at the initiation of services, Medical and Mental Health staff are required to disclosed the limitations of confidentiality and duty to report sexual abuse and sexual harassment via PREA Medical Screening Questions form Information Regarding Consent for Treatment.</p> <p>Staff is required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official immediately upon learning it per PREA Policy.</p> <p>Interview with mental health staff indicates she has never become aware of incidents of sexual abuse or sexual harassment incident. Interview with medical staff indicates she became aware of sexual abuse and sexual harassment incident 1 year ago due to a PREA disclosure and reported the incident to supervisor.</p> <p>115.61(d): Agency reports that per PREA Policy 606.10, if the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.</p> <p>Interview with Facility Commander or Designee - Q: 15</p> <p>Interview with the PREA Coordinator and Facility Commander indicates that if said victim is under the age of 18, Child Protective Services (CPS) is informed. If victim is considered a vulnerable adult, Adult Protective Services (APS) is notified. Agency reports that all visitation is through glass or phone.</p> <p>115.61(e): PREA Policy 606.5 mandates that the facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.</p> <p>Interview with Facility Commander indicates that all allegations of sexual abuse and sexual harassment (including those from 3rd party and anonymous sources) reported directly to designated facility investigators.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.61.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>115.62(a): PREA Policy 606.5 and Grievance Policy 609.4.1 mandates that states that any incarcerated person who believes the person or any other incarcerated person is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the incarcerated person and shall provide an initial response within 48 hours. The supervisor shall refer the grievance to the Lieutenant, who will investigate and issue a final decision within five calendar days. The initial response and final decision shall be documented and shall include a determination whether the incarcerated person is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.52). Agency reports that In the past 12 months, there have been no instances when the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.</p> <p>Interview with Agency Head or designee indicates that Classification will classify all IPs appropriately.</p> <p>Interview with Facility Commander or designee indicates that when learning in an IP is a subject of substantial risk of sexual abuse. staff takes the protective action to isolate the IP from potential risk of imminent sexual abuse by removing the IP from the possible perpetrator. IPs safety is ensured, Supervisor is informed, re-classify/ rehouse if required through classification and document the incident. Agency also follows up with any medical or mental health issues.</p> <p>Interview with Random Sample of Staff indicates that IPs can privately report sexual abuse. and sexual harassment, retaliation by other IPs or staff for reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment by way of utilizing the Community Violence Solutions (CVS) Crisis Intervention Hotline, submit a grievance or submit a request form to Medical or Mental Health via locked mailbox in housing unit.</p> <p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.62(a).</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.63(a): PREA Policy 606.5.1 mandates that upon report of an allegation of IP sexual abuse while confined at another facility, the Detention Services Bureau Captain or his/her designee shall notify the head of the facility or appropriate office of</p>

	<p>the agency or facility here sexual abuse is alleged to have occurred. Such notification shall be provided and documented as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>Agency reports that in the past 12 months, only 1 allegation the Marin County Jail received from Mendocino CJ that an IP reported sexual abuse during transport to another facility. Marin CJ staff followed up, spoke with the alleged victim who refused to cooperate with the Marin County Jail staff and case was determined to be unfounded. Agency provided auditor with copy of the allegation report for review and facility's response.</p> <p>115.63(b): PREA Policy 606.5.1 mandates that upon report of allegation of incarcerated person's abuse while confined at another facility, the Detention Services Bureau Captain or his/her designee shall notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. Such notification shall be provided and documented as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>115.63(c): PREA Policy 606.5.1 Reporting to other Facilities mandates that "If there is an allegation that an incarcerated person was sexually abused while the person was confined at another facility, the Captain shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Captain shall ensure that the notification has been documented (28 CFR 115.63)."</p> <p>115.63(d): PREA Policy 606 mandates that that if facility head or Agency office that receives such notification shall ensure that the allegation is investigated immediately in accordance with Standard 115.53.</p> <p>Interview with Agency Head or designee indicates that if another agency or a facility within another agency refers allegations of sexual abuse or sexual harassment that occurred within our facility, the on duty supervisor is the point of contact and is information is referred to the on duty PREA Coordinator.</p> <p>Interview with Facility Commander or Designee indicates that when the facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred in your facility, Marin CJ interviews the complainant & investigate the allegation even if the complainant is out of their custody,</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.63.</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.64(a): PREA Policy 606.7 mandates that if an allegation of incarcerated person sexual abuse is made, the first deputy shall (28 CFR 115.64): a) separate the parties b) request medical assistance as appropriate. If no qualified health care or mental health professionals are on-duty when a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate qualified health care and mental health professionals (28 CFR 115.82). c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence. d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g. washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating). e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing. f) Determine whether the alleged perpetrator should be administratively separated or administratively transferred during the investigation.

If the first responder is not a deputy, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a deputy.

If an allegation of incarcerated person sexual abuse is made, the first deputy to respond shall separate the parties.

Agency received PREA Allegation Reports for the period covering 5-1-23 to 4-30-24, that in the past 12 months 7 allegations have been received that an IP was sexually abused.

The first security staff member to respond to the report did not have to separate the alleged victim and abuser in any of the allegations reported during the last 12 months. The staff members that responded to the alleged PREA allegations during the last 12 months did not collect physical evidence.

Interview with Security Staff First Responders indicates that in her experience she separated the alleged victim and abuser and place them in interview rooms with supervision, preserved and protected the crime scene (cell) for collection of evidence, request the alleged victim did not take any actions that could destroy physical evidence, contact supervisor and notify medical and mental health. Agency informed auditor that No non-security staff available during Onsite Audit who acted as first responders.

Interview with IPs who Reported a Sexual Abuse: During the Onsite audit, there was only one IP housed in the facility during the Onsite Audit. IP refused auditor's request to be interviewed.

115.64(b): PREA Policy 606.7 mandates that if the 1st responder is not a Deputy, the responder shall request that the alleged victim not take any actions that could destroy physical evidence and then immediately notify a deputy. During the last 12 months, there have not been any instances where the first responder has been a non-security staff member.

Interview with Random Sample of staff indicates that the selected interviewee follows the 1st responder protocol:

- Keep victim safe and protected

	<ul style="list-style-type: none"> - Separate victim and perpetrator - No access to running water for both victim & perpetrator (place both in interview rooms under supervision) - Contact supervisor - Alert additional staff - Request for investigative staff <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.64.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.65(a): SART Protocol and Roles, to include PREA Policy 606 provides for actions that take place in response to an incident of sexual abuse among first responders, medical and mental health practitioners and investigators.</p> <p>Interview with the Facility Commander indicates that Agency has a documented plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse.</p> <p>Agency provided the PREA 606 Policy and SART Protocol and Roles in place of the Marin County Jail facility a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Documentation provided by Agency is non-compliant with Standard provision 115.65(a).</p> <p>1. Agency to provide auditor, through the Supplemental File, with a copy of the Marin CJ written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.65(a) and corrective action is required.</p> <p><u>Corrective Action Recommended:</u></p> <p>115.65(a): Agency provided the PREA 606 Policy and SART Protocol and Roles in place of the Marin County Jail facility a written institutional plan to coordinate actions</p>

	<p>taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Documentation provided by Agency is non-compliant with Standard provision 115.65(a).</p> <p>1. Agency to provide auditor, through the Supplemental File, with a copy of the Marin CJ written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p><u>Corrective Action Completion 1/13/2025:</u></p> <p>115.65(a): 2-3-2025 - Agency uploaded Sexual Assault Investigations Policy. 2/13/2025 - AGENCY uploaded Marin CJ Sexual Abuse Response Team Protocol to the Supplemental File. Auditor found documentation to be compliant with PREA Standard provision 115.65(a), as it identified coordinated actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and facility leadership.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.65(a) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.65.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.66(a): Agency reports that renewed Collective Bargaining Agreements and Contracts do not restrict or limit the Sheriff's Office from removing alleged staff sexual abusers from contact with IP pending the outcome of an investigation. Interview with Agency Head or designee indicates that the Agency has the ability to reassign staff in any instance pending investigation in a PREA violation.</p> <p>115.66(b): Auditor is not required to audit this provision</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.66.</p>

115.67	Agency protection against retaliation
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1469 622">115.67(a): PREA Policy 606.6 mandates that Facility to take appropriate measures to protect anyone who expresses a fear of retaliation because they reported or cooperated with an investigation of incarcerated person sexual abuse. Any form of retaliation shall be subject to punitive action. The facility has designated the PREA coordinator as the staff member who monitors for possible retaliation. The Agency has designated the PREA Coordinator - Custody Division Lt. is charged with monitoring for possible retaliation.</p> <p data-bbox="256 667 1481 857">115.67(b): The agency 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, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p data-bbox="256 880 1481 1070">Interview with Agency Head or designee indicates that agency protects IPs and staff from retaliation for sexual abuse or sexual harassment allegations with the recent update of new camera systems throughout the Marin CJ facility with audio maintained for 2 years. IP Classification System also protects IPs from retaliation for sexual abuse or sexual harassment allegations.</p> <p data-bbox="256 1093 1481 1283">Interview with Facility Commander indicates that measures taken to protect IPs and staff from retaliation include the following actions: Isolate, investigate, followup and document. Protection includes housing changes, transfers between PODs, removal of abusers and providing emotional support services through Community Violence Solutions and Crisis Intervention.</p> <p data-bbox="256 1305 1481 1451">Interview with Designated Staff Member Charged with Monitoring Retaliation indicates that assigned staff who monitor retaliation assists with 90-day retaliation monitoring to ensure the safety of victims. This may include housing transfers and emotional support services.</p> <p data-bbox="256 1473 1481 1664">Interview with IPs in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) indicate that IPs have access to programs, privileges, education and work opportunities to the extent possible (Special Housing), If placed in Restricted housing, the IPs only has access to tablets, Prisoner Services and IP Coordinator. While IPs are housed in these units, the facility documents:</p> <ul data-bbox="256 1675 799 1787" style="list-style-type: none"> - Opportunities that have been limited - Duration of the limitations - Reasons for such limitations <p data-bbox="256 1798 1406 1877">During the Onsite Audit only 1 IP was housed in the Marin CJ who reported sexual abuse. IP declined auditor's request for interview.</p> <p data-bbox="256 1910 1481 2067">115.67(c): PREA Policy 606.6 mandates that facility monitors the conduct and treatment of incarcerated persons or staff who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by incarcerated persons or staff for a period of at least 90 days. Monitoring may continue</p>

beyond 90 days if needed. Policy mandates the supervisor shall act promptly to remedy any such retaliation. Incarcerated Person (IP) monitoring shall also include periodic status checks.

Agency reports that no incidents of retaliation occurred in the past 12 months.

Interview with Facility Commander or Designee indicates that measures taken when retaliation is suspected is:

- Isolate
- Investigate
- Followup
- Document

Interview with Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) indicates that the agency employs 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. Agency reports that no incidents of retaliation occurred in the past 12 months.

115.67(d): PREA Policy 606.6 mandates that facility monitors the conduct and treatment of incarcerated persons or staff who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by incarcerated persons or staff for a period of at least 90 days. Monitoring may continue beyond 90 days if needed. Policy mandates the supervisor shall act promptly to remedy any such retaliation. Incarcerated Person (IP) monitoring shall also include periodic status checks.

Interview with Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) indicates that monitoring of IPs reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by incarcerated persons or staff for a period of at least 90 days shall include periodic status checks.

115.67(e): If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

Interview with Agency Head or designee indicates that

Interview with Facility Commander or designee indicates that different measures utilized to protect IPs and staff from retaliation include Isolate, investigate, followup and document. Measures may include housing changes, transfers, removal of alleged abusers, emotional support services.

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

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.67.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.68(a): PREA Policy 606.12 mandates that incarcerated people at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Agency reports that there have not been any incarcerated persons that were assigned to involuntary segregation in the past 12 months for one to 12 hours pending assessment.</p> <p>Classification Policy 508.6 mandates that Involuntary segregated housing (Protective Custody No-Mix) is used only after review of all available housing alternatives have shown there are no other means of protecting the IP. If segregated housing is used, the IP should have all possible access to programs and services for which he/she is otherwise eligible. A review is conducted every 30 days to determine if ongoing involuntary segregation housing is needed.</p> <p>Interview with Warden or Designee indicates that facility has a staffing plan to protect IPs against sexual abuse which is considered in this plan. When assessing adequate staffing levels and the need for video monitoring the facility staffing plan considers staffing plan items a thru k and includes Title 15, Title 24. The Plan is audited by the Bureau of State and Community Corrections to pass certification. Compliance with the Staffing Plan is documented and monitored by the Schedule Coordinator which documents all non-compliance with the Staffing Plan. Agency is currently undergoing modifications with camera projects and housing panel portion.</p> <p>Interview with Staff who Supervise Inmates in Segregated Housing indicates that when IPs are placed in segregated housing for protection from sexual abuse, or after having alleged sexual abuse, (special housing or restricted housing), they have access to the following to the extent possible:</p> <ul style="list-style-type: none"> - Privileges - Education - Work Opportunities - Tablets are provided with IP request forms <p>Should facility restrict access to programs, privileges, education or work opportunities, facility documents:</p> <ul style="list-style-type: none"> - Opportunities that have been limited - Duration of limitations - The reasons for such limitations <p>Once an IP is assigned to involuntary segregated housing, the facility reviews the IP's circumstances every 30 days to determine if continued placement in involuntary segregated housing is needed.</p> <p>Agency reports there are no IPs housed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse</p> <p><u>CONCLUSION:</u></p>

	Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.68(a).
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.71(a): PREA Policy 606.10 mandates that allegations of inmate sexual abuse/ harassment upon inmates shall be investigated promptly, thoroughly and objectively and forwarded for review and appropriate action through the chain of command. Interview with Investigative Staff indicates that initiation of investigation following an allegation of sexual abuse and sexual harassment begins immediately for initial investigation and within 30 minutes to 1 hour of notification for criminal investigation to be initiated. Anonymous or 3rd -party reports of sexual abuse or sexual harassment is initiated and investigated the same as any other investigation. Agency to provide auditor with copies of Sexual Abuse Investigation in a Confinement Setting Course Completion Certificates for all Criminal Investigators assigned to conduct Sexual Abuse Investigations in a Confinement Setting. National Institute of Corrections NIC Course Completion Certificates for Sexual Abuse Investigation in a Confinement Setting is also acceptable in meeting PREA mandates.</p> <p>115.71(b): PREA Policy 606.10 mandates that "Only investigators who have completed department-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71)."</p> <p>PREA Policy 302.6 Specialized Investigator Training mandates that "Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution (28 CFR 115.21; 28 CFR 115.34)."</p> <p>One investigator was trained at the Robert Presley Institute of Criminal Investigations course SEXUAL ASSAULT INVESTIGATION (ICI)</p> <p>This is a foundation specialty course of Robert Presley Institute of Criminal Investigations (ICI). The course is designed to increase the investigator's knowledge of sexual assault and improve investigative techniques. The course teaches the reporting process for prosecution by means of experience-based learning. The course is recommended for station detectives and specialized sexual assault investigators. At the conclusion of this training course, the investigator will: Be knowledgeable in the field of sexual assault investigations, Be able to employ proper investigative techniques, Prepare reports for filing, Prepare a case for prosecution. This course meets the training requirements of PC 13516(c).</p>

Interview with Investigative Staff indicates that there are 2 criminal investigators assigned to investigate sexual abuse in a confinement setting. The 1st Criminal Investigator completed Specialized Investigative Training POST IGI-2 40hr training for conducting Sexual Abuse Investigation in a Confinement Setting conducted on 9/16/22 and completed the PREA NIC 3-hour Sexual Abuse Investigation in a Confinement Setting Course on 11/26/24. The 2nd Criminal Investigator completed the 3 hour Sexual Abuse Investigation in a Confinement Setting Course on 8/7/24. Both Criminal Investigators have been trained on:

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

115.71(c) PREA Policy 606.10 Sexual Abuse and Sexual Harassment Investigations mandate "At a minimum the investigator(s) shall be responsible to: Gather and preserve direct and circumstantial evidence, including any viable physical and DNA evidence and any available electronic monitoring data. Interview alleged victims, suspected perpetrators and witnesses, and review prior complaints and reports, if any, of sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, the investigator(s) shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Determine whether staff actions (including misconduct), or failures to act, contributed to the abuse. Refer any/all substantiated allegations of inmate sexual abuse, sexual harassment or staff misconduct that appears to be criminal for prosecution. Continue and not terminate an investigation of alleged inmate sexual abuse, even when the alleged abuser or victim has been released from custody or terminated active employment with the Marin County Sheriff's Office. All investigations shall include efforts to determine whether staff actions or failures to act contributed to the abuse.

All written reports, physical, testimonial and/or documentary evidence, credibility assessments, electronic monitoring data, DNA and investigative facts and findings shall be thoroughly documented during the investigative process to adequately support the final outcome of the investigation, whether or not a referral for criminal prosecution is recommended or filed.

When practicable, an investigator of the same gender as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an incarcerated person's sexual orientation, physical gender, or gender identity. Investigators should not assume that any sexual activity among incarcerated persons is consensual."

The departure of the alleged abuser or victim from the employment or control of the jail or Department shall not provide a basis for terminating an investigation (28 CFR 115.71).

If the investigation is referred to another agency for investigation, the Department shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through

(e). The referral shall be documented. The Department shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71) If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115.71).

Evidence collection shall be based on a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).

Incarcerated persons alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115.71).

If a victim is considered a vulnerable adult under state law, the assigned investigator shall report the allegation to the designated social services agency as required (28 CFR 115.61)."

Interview with Investigative Staff indicates that first steps in initiating an investigation is staff receiving the allegation to determine if it is criminal in nature or not by interviewing the victim, alleged perpetrator, witnesses or complainant immediately.

Write initial report and refer up the investigative. chain. Refer the allegation to Sex Crimes Detectives Unit if allegation is criminal in nature. The investigation process includes security of the crime scene, interview victims & witnesses initiate the SART protocol, obtain advocate for emotional support, obtain video and physical evidence, obtain and secure clothing, bedding, DNA SART exam, etc. Document investigative findings and determine if prosecution is required.

115.71(d): PREA Policy 606.10 Sexual Abuse and Sexual Harassment Investigations mandates that "As part of the investigation, all prior complaints and reports of abuse involving the suspect shall be reviewed if the suspect is an inmate.

(a) The standard used to substantiate allegations of inmate sexual abuse shall be no higher than a preponderance of evidence.

(b) The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff.

(c) Inmates alleging sexual abuse shall not be required to submit to a polygraph or any other truth-telling device as a condition of proceeding with the investigation.

(d) Staff members, contractors and volunteers accused of harassment or abuse of an inmate shall not have any contact with the reporting staff member or others involved in the investigation."

Interview with Investigative Staff indicates that basis, in which credibility of an alleged victim, suspect or witnesses are judged based upon zero tolerance policy, to include consistent statements, witness statements, evidence and/or video availability. only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.71(e): PREA Policy 606.10 Sexual Abuse and Sexual Harassment Investigations mandates that "As part of the investigation, all prior complaints and reports of abuse involving the suspect shall be reviewed if the suspect is an inmate.

(a) The standard used to substantiate allegations of inmate sexual abuse shall be no higher than a preponderance of evidence.

(b) The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff.

(c) Inmates alleging sexual abuse shall not be required to submit to a polygraph or any other truth-telling device as a condition of proceeding with the investigation.

(d) Staff members, contractors and volunteers accused of harassment or abuse of an inmate shall not have any contact with the reporting staff member or others involved in the investigation."

Interview with Investigative Staff indicates that basis, in which credibility of an alleged victim, suspect or witnesses are judged based upon zero tolerance policy, to include consistent statements, witness statements, evidence and/or video availability. only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.71(f): PREA Policy 606.10 Sexual Abuse and Sexual Harassment Investigations mandates that "Gather and preserve direct and circumstantial evidence, including any viable physical and DNA evidence and any available electronic monitoring data. Interview alleged victims, suspected perpetrators and witnesses, and review prior complaints and reports, if any, of sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, the investigator(s) shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Determine whether staff actions (including misconduct), or failures to act, contributed to the abuse. Refer any/all substantiated allegations of inmate sexual abuse, sexual harassment or staff misconduct that appears to be criminal for prosecution. Continue and not terminate an investigation of alleged inmate sexual abuse, even when the alleged abuser or victim has been released from custody or terminated active employment with the Marin County Sheriff's Office. All investigations shall include efforts to determine whether staff actions or failures to act contributed to the abuse."

Interview with Internal Affairs Investigative Staff indicates that determination as to whether staff actions or failures to act contributed to the sexual abuse may be based on the investigation or interviews. This may lead to discipline via Professional Standards. Findings are referred through the chain of command. Administrative investigations are documented in written reports which include everything from interviews from evidence pertinent to the investigation, phone calls, recordings, location time/place, who, when and how. Findings are documented and followed up during investigation.

RECORD STORAGE - During the Onsite Audit, the auditor, accompanied by the PREA Compliance Manager gained access to the only Locked Documents Storage Unit. The unit was a large locked closet secured and locked with the PREA Compliance Manager

and the PREA Coordinator who maintains the security. Within the Locked Storage unit (located in the Sheriff's Training Room off the Administration Hallway) Logs, investigations, grievances.

115.71(g): PREA Policy 606.10 Sexual Abuse and Sexual Harassment Investigations mandates that: "All written reports, physical, testimonial and/or documentary evidence, credibility assessments, electronic monitoring data, DNA and investigative facts and findings shall be thoroughly documented during the investigative process to adequately support the final outcome of the investigation, whether or not a referral for criminal prosecution is recommended or filed."

Interview with Investigative Staff indicates that criminal investigations are documented and contain the following:

At a minimum the investigator(s) shall be responsible to:

Gather and preserve direct and circumstantial evidence, including any viable physical and DNA evidence and any available electronic monitoring data. Interview alleged victims, suspected perpetrators and witnesses, and review prior complaints and reports, if any, of sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, the investigator(s) shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Determine whether staff actions (including misconduct), or failures to act, contributed to the abuse. Refer any/all substantiated allegations of inmate sexual abuse, sexual harassment or staff misconduct that appears to be criminal for prosecution. Continue and not terminate an investigation of alleged inmate sexual abuse, even when the alleged abuser or victim has been released from custody or terminated active employment with the Marin County Sheriff's Office. All investigations shall include efforts to determine whether staff actions or failures to act contributed to the abuse.

All written reports, physical, testimonial and/or documentary evidence, credibility assessments, electronic monitoring data, DNA and investigative facts and findings shall be thoroughly documented during the investigative process to adequately support the final outcome of the investigation, whether or not a referral for criminal prosecution is recommended or filed.

When practicable, an investigator of the same gender as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an incarcerated person's sexual orientation, physical gender, or gender identity. Investigators should not assume that any sexual activity among incarcerated persons is consensual."

The departure of the alleged abuser or victim from the employment or control of the jail or Department shall not provide a basis for terminating an investigation (28 CFR 115.71).

If the investigation is referred to another agency for investigation, the Department shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through

(e). The referral shall be documented. The Department shall cooperate with the

outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71) If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115.71).

Evidence collection shall be based on a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).

In the past 12 months 2 investigations were sexual abuse allegations and 5 were sexual harassment allegations. All 7 investigations were determined to be unfounded. None of the 7 allegations were investigated criminally.

115.71(h): Prison_Rape_Elimination_Act-606.10 mandates that any/all substantiated allegations of inmate sexual abuse, sexual harassment or staff misconduct that appear to be criminal shall be referred for prosecution.

Agency reports that there have been no substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit. Interview with Investigative Staff indicates that cases are referred for prosecution only if it is determined that said cases are criminal in nature.

115.71(i): Prison_Rape_Elimination_Act-606.10 mandates that for Administrative Investigations, the Sheriff's Office to maintain all written reports and investigations for as long as the alleged abuser is incarcerated or employed by the Sheriff's Office, plus 5 years.

115.71(j): Prison_Rape_Elimination_Act-606.10 mandates that "The departure of the alleged abuser or victim from the employment or control of the jail or Department shall not provide a basis for terminating an investigation (28 CFR 115.71)."

Interview with Investigative Staff indicates that the investigation proceeds when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct by continuing the investigation to completion.

115.71(k): Auditor is not required to audit this provision.

115.71(l): Prison_Rape_Elimination_Act-606.10 mandates that "If the Marin County Sheriff's Office did not conduct the investigation, it shall request relevant information from the investigation to inform the victim inmate of its findings. When outside agencies investigate inmate sexual abuse, the Marin County Sheriff's Office shall cooperate with outside investigators and shall endeavor to remain informed about the process of the investigation."

Interviews with Facility Commander, PREA Coordinator, PREA Compliance Manager and Investigative Staff all agree that when outside agencies investigate sexual abuse, the facility cooperates with outside investigators and remains informed about the progress of the investigation and offers any assistance requested by said outside agency.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.71(a), 115.71(b) and corrective action is required.

Corrective Action Recommended:

115.71(a): 1. Agency to provide auditor with copies of Sexual Abuse Investigation in a Confinement Setting Course Completion Certificates for all Criminal Investigators assigned to conduct Sexual Abuse Investigations in a Confinement Setting.

2. National Institute of Corrections NIC Course Completion Certificates for Sexual Abuse Investigation in a Confinement Setting is also acceptable in meeting PREA mandates.

115.71(b): Auditor has not been provided the Sexual Abuse Investigator Training for the 1st Investigator.

1. Auditor awaits NIC and/or POST ICI-2 certificate for Sexual abuse Investigation in a Confinement Setting Course Completion for 2nd Criminal Investigator.

Corrective Action Completion 12/9/24 :

115.71(a): 12/9/24 - Agency uploaded Certificates of Completion of two Criminal Investigators who completed courses for Investigating Sexual Abuse in a Confinement Setting.

The first Investigator completed the 3 hour National Institute of Corrections (NIC) 3-hour training in 8/7/2024 and Second Investigator completed the 40 hour Robert Presley Institute of Criminal Investigation Sexual Assault Investigation Academy Division 40 hour training 9/16/2022 to include the ICI Sexual Assault Flyer which outlines the course description. Second Investigator completed NIC 3-hour training on 11/26/24.

115.71(b): 12/9/24 - Agency uploaded Certificates of Completion of two Criminal Investigators who completed courses for Investigating Sexual Abuse in a Confinement Setting. The first Investigator who was interviewed during the Onsite Audit completed the 3-hour National Institute of Corrections (NIC) training in 8/7/2024 and Second Investigator who was not available during the Onsite Audit completed the 40 hour Robert Presley Institute of Criminal Investigation Sexual Assault Investigation Academy Division 40 hour training 9/16/2022. Second Investigator completed NIC 3-hour training on 11/26/24. All certificates were uploaded to the Supplemental File.

The agency/facility has met the requirements of Standard provision(s) 115.71(a), 115.71(b) completed during the corrective action period. The auditor has determined

	that the agency/facility has met the standard provisions and complies with Standard 115.71.
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.72(a): PREA Poliy 606 mandates that the standard used to substantiate allegations of inmate sexual abuse shall be no higher than a preponderance of evidence.</p> <p>Interview with Investigative Staff indicates that probable cause is the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment. Interview with Investigative Staff responded that probable cause is the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment. The response was non-compliant with Standard provision 115.72(a).</p> <p>Agency to retrain Criminal Investigators on the imposed Standard of preponderance of the evidence or lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.72(a) and corrective action is required.</p> <p><u>Corrective Action Recommended:</u></p> <p>115.72(a): Interview with Investigative Staff responded that probable cause is the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment. The response was non-compliant with Standard provision 115.72(a).</p> <p>1. Agency to retrain Criminal Investigators on the imposed Standard of preponderance of the evidence or lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p><u>Corrective Action Completion 12/12/24:</u></p> <p>115.72(a): Agency uploaded Certificates of Completion of two Criminal Investigators who completed courses for Investigating Sexual Abuse in a Confinement Setting. The first Investigator who was interviewed during the Onsite Audit completed the 3 hour National Institute of Corrections (NIC) training in 8/7/2024. The 2nd Investigator, who was not available during the Onsite Audit completed the POST ICI-2 Robert Presley Institute of Criminal Investigation Sexual Assault Investigation Academy Division 40</p>

	<p>hour training 9/16/2022. Both investigators are currently assigned to conduct Sexual Abuse Investigations in a Confinement Setting.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.72(a) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.72.</p>
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.73(a): PREA Policy 606.10.2 mandates that the Captain of the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, or unfounded. If the Department did not conduct the investigation, the Department shall request relevant information from the investigative agency in order to inform the incarcerated person.</p> <p>Agency reports 7 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. Of the alleged sexual abuse investigations that were completed in the past 12 months, Agency reports that all 7 inmates who were notified, verbally or in writing, of the results of the investigation.</p> <p>Interview with the Facility Commander indicates that the facility notifies an IP who makes an allegations of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated or unfounded following an investigation.</p> <p>Interview with Investigative Staff indicates that the agency procedures require that an IP who makes an allegation of sexual abuse must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Responsibility for notification belongs to the PREA Coordinator.</p> <p>There was only 1 IP who reported sexual abuse who was housed in the Marin County Jail during the Onsite Audit. IP was housed in Restricted Housing, refused the request by auditor to be interviewed and speak to auditor.</p> <p>Policy CUS 606.10.2 mandates that "The Captain or the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, unsubstantiated, or unfounded."</p> <p>Standard provision 115.73(a)-1 mandates that "The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency."</p> <p>Agency failed to provide IP notifications as to the outcome of the investigations for the 2 sexual abuse investigations completed over the last 12 months.</p> <p>Agency to provide IP notifications of the 2 sexual abuse investigations completed</p>

over the last 12 months and provide documentation to auditor through the Supplemental File.

115.73(b): Agency reports that Marin County Sheriff's Office conducts both the administrative and criminal investigations. No investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months.

115.73(c): PREA Policy 606 mandates that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the facility shall subsequently inform the incarcerated person (unless the agency has determined that the allegation is unfounded) whenever:

- 1) The staff member is no longer posted within the incarcerated person's unit;
- 2) The staff member is no longer employed at the facility;
- 3) The facility learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- 4) The facility learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

Agency reports that there have not been any substantiated or unsubstantiated complaints (i.e. not unfounded) of sexual abuse committed in the past 12 months. There was only 1 IP who reported sexual abuse who was housed in the Marin County Jail during the Onsite Audit. IP was housed in Restricted Housing, refused the request by auditor to be interviewed and speak to auditor.

115.73(d): PREA Policy 606 mandates that following an IP's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim when ever:

1. The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. ; or
2. The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

There was only 1 IP who reported sexual abuse who was housed in the Marin County Jail during the Onsite Audit. IP was housed in Restricted Housing, refused the request by auditor to be interviewed and speak to auditor.

115.73(e): PREA Policy 606 mandates that the PREA Coordinator to document all such notifications or attempted notifications. Agency initially reported to auditor that 4 sexual abuse investigations completed over the last 12 months culminated in the verbal notification of the outcome of the investigation to the alleged victim with follow-up memorandums with the investigative reports. Agency later verified to auditor that only 2 sexual abuse investigations occurred over the past 12 months. Policy CUS 606.10.2 mandates that "The Captain or the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, unsubstantiated, or unfounded."

Agency failed to provide IP notifications as to the outcome of the investigations for the 2 sexual abuse/sexual harassment investigations completed over the last 12 months.

Agency to provide IP notifications of the 2 sexual abuse/sexual harassment

investigations completed over the last 12 months and provide documentation to auditor through the Supplemental File.

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

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.73(a), 115.73(e) and corrective action is required.

Corrective Action Recommended:

115.73(a): Agency failed to provide IP notifications as to the outcome of the investigations for the 2 sexual abuse investigations completed over the last 12 months.

1. Agency to provide IP notifications of the 2 sexual abuse investigations completed over the last 12 months and provide documentation to auditor through the Supplemental File.
2. Agency to amend Policy PREA 606.10.2 to meet Standard provision 115.73(a) -1 thru 3 and upload to the Supplemental File

115.73(e): Policy CUS 606.10.2 mandates that "The Captain or the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, unsubstantiated, or unfounded."

Agency failed to provide IP notifications as to the outcome of the investigations for the 2 sexual abuse/sexual harassment investigations completed over the last 12 months.

1. Agency to provide IP notifications of the 2 sexual abuse/sexual harassment investigations completed over the last 12 months and provide documentation to auditor through the Supplemental File.

Corrective Action Completion 12/16/24 :

115.73(a): 12/16/24 - The PREA Coordinator provided memorandums to the alleged sexual abuse victims identifying outcome of the 2 sexual abuse investigations. One investigation was determined to be unfounded and the other was determined to be unsubstantiated.

115.73(e): 12/16/24 - The PREA Coordinator provided memorandums to the alleged sexual abuse victims identifying outcome of the 2 sexual abuse investigations. One

	<p>investigation was determined to be unfounded and the other was determined to be unsubstantiated.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.73(a), 115.73(e) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.73.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.76(a): Policy CUS 606-mandates staff is subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies. PREA Policy 606.11 mandates that "Sexual abuse and sexual harassment between staff, volunteers or contract personnel and incarcerated persons is strictly prohibited. The fact that an incarcerated person may have initiated a relationship or sexual contact is not recognized as a defense to violating this policy. Any incident involving allegations of staff-on-incarcerated person sexual abuse or sexual harassment shall be referred to the Professional Standards Unit for investigation."</p> <p>Policy 314 Discriminatory Harassment mandates that "The purpose of this policy is to prevent department members from being subjected to discrimination or harassment, including sexual harassment, and retaliation. Nothing in this policy is intended to create a legal or employment right or duty that is not created by law."</p> <p>Policy PMR (Personnel Management Regulation) page 6 of 9 mandates that "After the Director of Human Resources receives the results of the investigation, the Director of Human Resources will determine whether the policy has been violated and will communicate this determination to the Department Head. Upon completion of consultation with the Department Head or designee, within thirty (30) calendar days of the receipt of the investigation findings, the findings of the investigation and whether any action will be taken, will then be communicated to the complainant and subject. In the event a complaint is sustained, remedial action will be decided in accordance with County policy and based upon the advice of the Director of Human Resources. If disciplinary action is taken, it shall be done in accordance with PMR 47. Due to the confidential nature of disciplinary actions, the complainant will not be informed of the particular remedial action taken."</p> <p>115.76(b): Agency reports that In the past 12 months, no staff from the facility who have violated agency sexual abuse or sexual harassment policies.</p>

	<p>In the past 12 months, no staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76(c): PREA Policy 606 mandates that discipline shall be proportionate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses by other members with similar histories. In the past 12 months no staff has been disciplined, short of termination, for violation of sexual abuse or sexual harassment policies.</p> <p>Agency reports that in in the past 12 months, no staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).</p> <p>115.76(d): Agency states that all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. In the past 12 months, no staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.76.</p>
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115.77 Corrective action for contractors and volunteers	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.77(a): PREA Policy 606 mandates any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with IP and reported for criminal investigation. Depending upon outcome, the contractor or volunteer may be permanently barred from providing service to IP at the Marin County Jail. In the past 12 months, no contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of IP.</p> <p>115.77(b): PREA Policy 606 mandates any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with IP and reported for criminal investigation.</p> <p>Interview with the Facility Commander indicates that in case of any violation of agency, sexual abuse, or sexual harassment, policies by contractor or volunteer, the remedial measures facility takes is administrative leave in the event is an alligation or terminate contractor or volunteer position if allegation is determined to be founded.</p>

	<p>The facility always prohibits further contact with IPs pending outcome of the investigation.</p> <p>CONCLUSION: Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.77.</p>
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115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.78(a): PREA Policy 606 mandates that IP who violate IP sexual abuse and sexual conduct rules shall be subject to disciplinary sanctions up to and including loss of good-time and imposed segregation time pursuant to a properly conducted administrative disciplinary hearing. Agency reports that in the past 12 months, no administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility. Agency reports that in the past 12 months, no criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.</p> <p>115.78(b): Agency reports that Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Interview with Facility Commander indicates that disciplinary sanctions IPs are subject to following an administrative or criminal finding that the IP engaged in IP-on-IP sexual abuse is the criminal process. Sanctions are proportionate to the nature and circumstances of the abuses committed, the IPs disciplinary histories, and the sanctions imposed for similar offenses bu other IPs with similar histories. Mental disability or mental illness is considered when determining sanctions. Marin CJ Major Rule Violations sheet (provided in the Supplemental File) contains All Rules and Disciplinary penalties that comply with Title 15 Regulations, Article 7 as well as sections 4019 and 6030 of the Penal Code.</p> <p>115.78(c): Agency reports that The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Interview with Facility Commander indicates that disciplinary sanctions IPs are subject to following an administrative or criminal finding that the IP engaged in IP-on-IP sexual abuse is the criminal process. Sanctions are proportionate to the nature and circumstances of the abuses committed, the IPs disciplinary histories, and the sanctions imposed for similar offenses bu other IPs with similar histories. Mental disability or mental illness is considered when determining sanctions. Marin CJ Major Rule Violations sheet (provided in the Supplemental File) contains All Rules and</p>

Disciplinary penalties that comply with Title 15 Regulations, Article 7 as well as sections 4019 and 6030 of the Penal Code.

115.78(d): Agency reports that the Jail Mental Health team does not specifically provide therapy designated to address and correct the underlying reasons or motivations for abuse, but should a client reach out regarding a PREA related incident, the jail mental health team will provide other interventions (brief counseling, community referrals, psycho education, etc.) to support the client.

If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility does not consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

Interview with Medical and Mental Health Staff indicates that the facility does not offer therapy, counseling or other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse.

115.78(e): PREA Policy 606 mandates that the incarcerated person is disciplined for sexual conduct with staff whether or not consent was given.

PREA Policy 606 is non-compliant with Standard provision 115.78(e)-1. Standard provision 115.78(e)-1 mandates that "The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

Agency to amend the Agency/Facility written Response to meet requirements of Standard provision 115.78(e)-1

115.78(f): Agency reports they prohibit disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.78(g): Agency reports that all sexual activity between inmates is prohibited.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.78(e) and corrective action is required.

Corrective Action Recommended:

115.78(e): PREA Policy 606 mandates that the incarcerated person is disciplined for sexual conduct with staff whether or not consent was given.

PREA Policy 606 is non-compliant with Standard provision 115.78(e)-1.

Standard provision 115.78(e)-1 mandates that "The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

Agency to amend the Agency/Facility written Response to meet requirements of Standard provision 115.78(e)-1

	<p><u>Corrective Action Completion 2/3/25:</u></p> <p>115.78(e): 2/3/25 - During Issue Log #2 conference call with PREA Coordinator Staff it was discovered that the initial language for Policy 600 was incorrect. The correct Policy was found on Policy 606 Discipline pg 8 Section 600.10 Limitations on Disciplinary Actions bullet #8 which mandates that "No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.78(e) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.78.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.81(a): N/A - Facility is not a prison</p> <p>115.81(b): N/A - Facility is not a prison</p> <p>115.81(a)/(c): Agency reports that all IP at this facility who have disclosed an prior sexual victimization during the intake screening are offered an evaluation with a medical or mental health practitioner within 14 days of the intake screening at no cost. During the intake should an IP request Mental Health assistance will be referred by intake nurse using a Mental Health referral form. Mental Health notes the name, booking number and date the referral was made and schedule to see IP within 14 days of the date of the referral.</p> <p>Agency reports that in the past 12 months 100% are offered a follow up which creates a task in out electronic health record to be completed within 14 days. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.</p> <p>Sapphire is an electronic record system that creates a follow up task to be completed within 14 days.</p> <p>Interviews with 2 IPs who Disclose Sexual Victimization at Risk Screening indicates that the 1st IP interviewed interviewed indicated that upon intake she was provided with a translator to assist with understanding and translation of intake documentation. Roster provided by agency for Onsite Audit interview selection indicated that this IP's intake date was 6/19/24 and Sapphire electronic record system indicated IP was interviewed by MH on 5/17/23. The 2nd IP interviewed selected from roster provided by agency indicated could not remember if she was asked about prior</p>

sex abuse or if Mental Health interviewed her. This IP's intake date was 7/7/24 and the Sapphire electronic record system indicated IP was interviewed by MH on 12/10/22

Interviews with Staff Responsible for Risk Screening indicates that if a screening indicates that an IP has experienced prior sexual victimization, whether in an institutional setting or in the community, they are offered a follow-up meeting with a medical or mental health practitioner within 48 hours of intake for review.

Agency provided auditor with copy of the Sapphire electronic health record to be completed within 14 days for IPs who disclosed prior sexual victimization during screening. The 1 page document is difficult to cypher as it maintained only 10 IP names in 4 months in the year 2024:

Agency to expand the tracking system to include additional data such as:

1. Tasking & Appointment Documentation expanded and maintained within the last 12 months.
2. Medical or mental health practitioner assigned to screen the IP
3. Date of intake and Date of IP referral to Mental Health and date Mental Health saw IP within 14 days of facility arrival date.

115.81(d): Policy 606 mandates that any information related to sexual victimization or abusiveness that occurred in any correctional facility shall be limited to Medical & Mental Health practitioners and necessary sworn staff. This information shall only be used for Medical and Mental Health treatment plans and security and management decisions, including housing, bed, work, education and programs assignments.

Accessed on a need to know basis.

PREA Policy 606.9 "EXAMINATION, TESTING, AND TREATMENT" mandates that:

"(i) The health authority or mental health staff shall obtain informed consent from incarcerated persons before reporting information to jail staff about prior sexual victimization that occurred somewhere other than an institutional setting unless the incarcerated person is under the age of 18 (28 CFR 115.81).

(j) Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other staff unless it is necessary to inform jail staff about security or management decisions (28 CFR 115.81)."

RECORD STORAGE - During the Onsite Audit, the auditor, accompanied by the PREA Compliance Manager gained access to the only Locked Documents Storage Unit. The unit was a large locked closet secured and locked with the PREA Compliance Manager and the PREA Coordinator who maintains the security. Within the Locked Storage unit (located in the Sheriff's Training Room off the Administration Hallway) Logs, investigations, grievances.

115.81(e): PREA Policy 606(i) mandates that "The health authority or mental health staff shall obtain informed consent from incarcerated persons before reporting information to jail staff about prior sexual victimization that occurred somewhere other than an institutional setting unless the incarcerated person is under the age of 18 (28 CFR 115.81)."

Agency reports that Medical and Mental Health staff shall obtain informed consent from inmates before reporting information about prior sexual victimization in the

community.

Interview with Medical and Mental Health staff indicates that they obtain informed consent from IPs in intake before reporting about prior sexual victimization that did not occur in an institutional setting. PREA medical screening questions and Information Regarding Consent for Treatment are obtained during intake which state the following:

Before treatment, you must consent indicating that you want such services. Your communications during treatment and your records are confidential unless the Practitioner is required by law to discuss your care with persons outside the health care system. These legal exceptions include the following situations:

- Serious threat of physical violence against a reasonably identifiable victim or victims shall be reported to that person or the police
- Reasonable suspicion of child abuse reported
- Reasonable suspicion of abuse of elder/dependent adult shall be reported

Interview with Medical and Mental Health Staff indicates that they obtain informed consent from IPs before reporting about prior sexual victimization that did not occur in an institutional setting. The PREA Medical Screening Questions utilized in intake are utilized for these purposes.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.81(a), 115.81(a)/(c) and corrective action is required.

Corrective Action Recommended:

115.81(a): Agency provided auditor with copy of the Sapphire electronic health record to be completed within 14 days for IPs who disclosed prior sexual victimization during screening. The 1 page document is difficult to cypher as it maintained only 10 IP names in 4 months in the year 2024:

Agency to expand the tracking system to include additional data such as:

1. Tasking & Appointment Documentation expanded and maintained within the last 12 months.
2. Medical or mental health practitioner assigned to screen the IP
3. Intake date and Date of IP referral to Mental Health and date Mental Health saw IP within 14 days of facility arrival date.

115.81(a)/(c): Agency provided auditor with copy of the Sapphire electronic health record to be completed within 14 days for IPs who disclosed prior sexual victimization during screening. The 1 page document is difficult to cypher as it maintained only 10 IP names in 4 months in the year 2024:

Agency to expand the tracking system to include additional data such as:

1. Tasking & Appointment Documentation expanded and maintained within the last 12 months.

	<p>2. Medical or mental health practitioner assigned to screen the IP</p> <p>3. Date of intake and Date of IP referral to Mental Health and date Mental Health saw IP within 14 days of facility arrival date.</p> <p><u>Corrective Action Completion</u> 2/13/25:</p> <p>115.81(a)/(c): 2/13/25 Agency uploaded Marin CJ IP Intake Sex Abuse History screening chart to the Online Audit System in order to verify that IPs were screened at Intake between 9/25/23 and 9/9/24 and 95 IPs agreed to meet with mental health practitioners. The attached document verifies that each of the IPs identified in the documentation met with a mental health practitioner within 14 days of intake.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.81(a/c) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.81.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.82(a): PREA Policy 606.8 Sexual Abuse Victims mandates that "Incarcerated persons who are victims of sexual abuse shall be transported to the nearest appropriate location for treatment of injuries and collection of evidence, and for crisis intervention services (28 CFR 115.82). Depending on the severity of the injuries, transportation may occur by a staff member or by ambulance, in either case with appropriate security to protect the staff, the incarcerated person, and the public, and to prevent escape.</p> <p>A victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Department shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Department, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented. A rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in (34 USC § 12511), to sexual assault victims of all ages. A rape crisis center that is part of a government unit may be used if it is not part of the criminal justice system (such as a law enforcement agency) and it offers a level of confidentiality comparable to the level at a nongovernmental entity that provides similar victim services (28 CFR 115.21)."</p> <p>Agency reports that P victims of sexual abuse shall receive timely, unimpeded access</p>

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.

Logs are kept in an electronic system called Sapphire.

Interview with Medical and Mental Health Staff indicates that IP victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services, and receive said services in a timely manner - right away.

The nature and scope of these services are determined according to the practitioners' professional judgment.

Only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.82(b): Agency reports that if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. Interview with Security Staff and Non-Security Staff First Responders indicate they respond to sexual abuse and sexual harassment according to the 1st Responder Protocol:

- Separate the alleged victim and abuser
- Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence
- Request that the alleged victim not take any actions that could destroy physical evidence
- Ensuring the alleged abuser does not take any of the above actions that could destroy physical evidence.
- Immediately notifying medical and mental health practitioners
- Contact Supervisor.

115.82(c): PREA Policy 606,9(e) mandates that "Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner."

Agency reports that Policy mandates inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception, pregnancy tests and sexually transmitted infections, prevention and testing as appropriate.

Interview with Medical and Mental Health Staff indicates that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis immediately via the hospital emergency room.

Only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.82(d): PREA Policy 606,9(h) mandates that "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83)."

	<p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.82.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83(a): PREA Policy 606.9 Examination, Testing, and Treatment mandates that "Examination, testing, and treatment shall include the following (15 CCR 1206):</p> <p>(a) Forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANE)s. If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Department shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21).</p> <p>(b) If requested by the victim, a victim advocate, a qualified department staff member, or a qualified community organization staff member shall accompany the victim through "the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information, and referrals (28 CFR 115.21).</p> <p>(c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).</p> <p>(d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.</p> <p>(e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner.</p> <p>(f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner.</p> <p>(g) Victims shall be provided with 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 (28 CFR 115.83).</p> <p>(h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).</p> <p>(i) The health authority or mental health staff shall obtain informed consent from incarcerated persons before reporting information to jail staff about prior sexual</p>

victimization that occurred somewhere other than an institutional setting unless the incarcerated person is under the age of 18 (28 CFR 115.81).

(j) Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other staff unless it is necessary to inform jail staff about security or management decisions (28 CFR 115.81)."

115.83(b): PREA Policy 606.9(g) Examination, Testing, and Treatment mandates that "Victims shall be provided with 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 (28 CFR 115.83)."

Interview with Medical and Mental Health Staff indicates that evaluation and treatment of IPs who have been victimized entails:

- Evaluation and mediation treatment,
- Talk therapy
- Ongoing emotional support
- Interventions specific to emotional regulation and distress tolerance to include community services for trauma informed services

Agency reported only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.83(c): Agency reports that the facility shall provide such victims with medical and mental health services consistent with the community level of care.

Interview with Medical and Mental Health Staff indicates that Medical and Mental Health services are offered consistent with community level or care.

115.83(d): PREA Policy 505.9(f) mandates that "Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner."

Agency reported only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.83(e): PREA Policy 505.9(f) mandates that "Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner."

Interview with Medical and Mental Health Staff indicates that if pregnancy results from sexual abuse while incarcerated victims are given timely information and access to all lawful pregnancy-related services right away.

Agency reported only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.

115.83(f): PREA Policy 505.9(f) mandates that "Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and

	<p>access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner."</p> <p>Agency reported only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.</p> <p>115.83(g): PREA Policy 505.9(h) mandates that "Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83)."</p> <p>Agency reported only 1 IP who reported sexual abuse was housed at Marin CJ during the Onsite Audit and declined to be interviewed by auditor.</p> <p>115.83(h): N/A - Facility is a jail, not a prison.</p> <p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.83.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.86(a): PREA Policy 606.13 Sexual Abuse Incident Review mandates that "An incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded (28 CFR 115.86)."</p> <p>Agency reports that in the past 12 months, no criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents.</p> <p>Auditor's review of the 2 sexual abuse allegations investigated over the past 12 months were determined to be unfounded.</p> <p>115.86(b): PREA Policy 606.13 Sexual Abuse Incident Review mandates that "An incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded (28 CFR 115.86). The review should occur within 30 days of the conclusion of the investigation."</p> <p>Agency reports that in the past 12 months, no criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents.</p> <p>115.88(c): PREA Policy 606.13 Sexual Abuse Incident Review mandates that "The review team shall include upper-level management officials and seek input from line</p>

	<p>supervisors, investigators, and qualified health care and/or mental health professionals, as appropriate:"</p> <p>Interview with Facility Commander or designee indicates that the facility has a sexual abuse incident review team which includes upper-level management officials and seek input from line supervisors, investigators, and qualified health care and/or mental health professionals, as appropriate.</p> <p>115.86(d): PREA Policy 606.13 Sexual Abuse Incident Review mandates that the Incident Review Team shall consider all 6 criteria as required in Standard provision 115.86(d).</p> <p>Interview with Warden or Designee indicates that the team uses information from the sexual abuse incident review to identify every incident through the administrative sergeant to determine if any practices or policies need to be updated or changed. The Incident Review Team considers the 6 criteria mandated by Standard provision 115.86(d).</p> <p>Interview with PREA Compliance Manager facility conducts, sexual abuse. It's the reviews, facility prepares a report of his findings from the reviews, including determinations per standard 115.86(d). This includes any recommendations for improvement. Report of incident review findings are forwarded to me for review in the event that any trends are noticed and brought to the attention of the PREA Coordinator for action to be taken if required.</p> <p>Interview with Incident Review Team indicates that the Incident Review Team considers the 6 criteria outlined per Standard 115.86(d).</p> <p>115.86(e): PREA Policy 606.13 Sexual Abuse Incident Review mandates that the Incident Review Team prepares "a written report of the team's findings, including but not limited to determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Sheriff or the authorized designee and the PREA coordinator."</p> <p>The Incident Review Team shall prepare a report of its findings any determinations and recommendations for improvement, or document the reasons for not doing so.</p> <p>CONCLUSION:</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.86.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87(a): PREA Policy 606.14 Data Reviews mandates that "This department shall

conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training by:

- (a) Identifying problem areas.

- (b) Identifying corrective actions taken.

- (c) Recommending corrective actions.

- (d) Comparing current annual data and corrective actions with those from prior years.

- (e) Assessing the department's progress in addressing sexual abuse.

Supervisors shall forward all information to the PREA Coordinator, while maintaining a copy for their files. This data shall be securely maintained.

Upon receipt of a completed investigation, the PREA Coordinator or his/her designee, shall compile all the incidents on an annual basis, using the most recent version of the Survey of Sexual Violence form from the Department of Justice. Upon request, the Sheriff's Office will provide all data from the previous calendar year to the Department of Justice. A copy of this data shall be maintained for no less than ten years.

The information from all the incidents in the prior calendar year will be reviewed and compiled into an annual report. The report shall also include corrective actions for the jail, along with a comparison to the previous year's data, and submitted to the Sheriff for review. Upon approval of the Sheriff, the report shall be posted on the Sheriff Office website annually, after all necessary redactions have been made, pursuant to California Penal Code § 293. The reports shall be approved by the Captain and made available through the department website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).

All aggregated sexual abuse data from Marin County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the department website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89)."

115.87(b): PREA Policy 606.14 Data Reviews mandates that "All aggregated sexual abuse data from Marin County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the department website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89)."

2022 PREA Annual Report remains on the Marin County Sheriff's website uploaded on 1/5/23 available to the public. Statistics identified sexual abuse and sexual harassment annually from 2016 thru 2022. Per Standard provision 115.88(d) statement on the report, "Personal Identifying Information has been redacted from the Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail. All aggregated sexual abuse data shall be readily available to the public annually via the Sheriff's Office public website. All personal identifiers shall be removed.

1. Agency to upload annual aggregated sexual abuse data via the Sheriff's Office

public website to make it readily available to the public after redactions have been initiated.

115.87(c): Agency reports that the Sheriff's Office collect accurate, uniform data for every allegation of incarcerated persons' sexual abuse at the jail. Agency failed to provide the 2023 Annual Report for public viewing in the Sheriff's Website.

1. Agency to upload the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice via the Supplemental File.

115.87(d): Agency reports that PREA Policy 606.15 Records mandates the Sheriff's Office shall collect accurate, uniform data for every allegation of inmate sexual abuse at the jail. "The Department shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Department, plus five years"

The PREA coordinator or his designee shall compile all incidents on an annual basis, using the most recent version of the Survey of Sexual Violence form from the Department of Justice. Upon request, the Sheriff's Office will provide all data from the previous calendar year to the Department of Justice. A copy of this data shall be maintained no less than 10 years.

115.87(e): N/A - Agency reports they do not contract for the confinement of its inmates.

115.87(f): N/A - Agency reports that the DOJ has not requested agency data

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.87(b), 115.87(c) and corrective action is required.

Corrective Action Recommended:

115.87(b): All aggregated sexual abuse data shall be readily available to the public annually via the Sheriff's Office public website. All personal identifiers shall be removed.

1. Agency to upload annual aggregated sexual abuse data via the Sheriff's Office public website to make it readily available to the public after redactions have been initiated.

115.87(c): Agency failed to provide the 2023 Annual Report for public viewing in the

Sheriff's Website.

1. Agency to upload the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice via the Supplemental File.

Corrective Action Completion 9/30/24:

115.87(b): Agency uploaded 2023 PREA Annual Report on the Agency website annual aggregated sexual abuse data and Personal Identifying Information Statement

"Personal Identifying information has been redacted from Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail", has been included in the narrative of the 2023 PREA Annual Report.

115.87(c): IAW PREA Standard provision 115.87(c)-1 mandate, For 2023 Annual Report, Agency to provide the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice via the Supplemental File.

RESPONSE: 9/30/24 Auditor received a response from the PREA Auditor Assistance group regarding the narrative explanation for Standard provision 115.87(c)-1. In explanation of the Standard provision narrative states that "jails do not have to complete the SSV every year and not unless they receive it in the mail as part of the yearly jail sample. They still must collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions, aggregate the incident-based sexual abuse data at least annually (presumably in the annual report in this case), and this incident-based data must be sufficient enough to answer all questions from the most recent version of the SSV, at minimum, per 115.87."

Agency provided their 2023 Annual Report uploaded to the Supplemental File which includes uniform data for every allegation of sexual abuse and set of definitions meets the requirements of Standard provision 115.87(c)-1.

The agency/facility has met the requirements of Standard provision(s) 115.87(b), 115.87(c) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.87.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.88(a): PREA Policy 60614 Data Reviews mandates that "This department shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training by:</p> <ul style="list-style-type: none"> (a) Identifying problem areas. (b) Identifying corrective actions taken. (c) Recommending corrective actions. (d) Comparing current annual data and corrective actions with those from prior years. (e) Assessing the department's progress in addressing sexual abuse. <p>Supervisors shall forward all information to the PREA Coordinator, while maintaining a copy for their files. This data shall be securely maintained.</p> <p>Upon receipt of a completed investigation, the PREA Coordinator or his/her designee, shall compile all the incidents on an annual basis, using the most recent version of the Survey of Sexual Violence form from the Department of Justice. Upon request, the Sheriff's Office will provide all data from the previous calendar year to the Department of Justice. A copy of this data shall be maintained for no less than ten years.</p> <p>The information from all the incidents in the prior calendar year will be reviewed and compiled into an annual report. The report shall also include corrective actions for the jail, along with a comparison to the previous year's data, and submitted to the Sheriff for review. Upon approval of the Sheriff, the report shall be posted on the Sheriff Office website annually, after all necessary redactions have been made, pursuant to California Penal Code § 293. The reports shall be approved by the Captain and made available through the department website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88)."</p> <p>Interview with Agency Head or designee indicates that incident based sexual abuse data is used to assess and improve sexual abuse prevention, detection, and response policies, practices and training by identifying vulnerable areas inside the facility and identifying trends or violatons.</p> <p>Interview with the PREA Coordinator indicates that the Agency reviews data collected and aggregated pursuant to Standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies and training. In order to ensure that data collected is securely retained, the Sheriff's office share a drive firewall and drive access to administration only. The agency takes corrective action on ongoing basis regarding this data if applicable. The agency prepares an annual report of findings from its data review and any corrective actions for the facility, as well as the agency as a whole.</p> <p>Interview with the PREA Compliance Manager indicates that if the agency reduce data collected navigated pursuit to standard 115.87 in order to assess and improved</p>

effectiveness of its annual abuse prevention, detection, and response policies and training, the role the facility and the facility data play is to provide a tool to assist and improve training.

115.88(b): PREA Policy 60614 Data Reviews mandates that "This department shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training by:

- (a) Identifying problem areas.
- (b) Identifying corrective actions taken.
- (c) Recommending corrective actions.
- (d) Comparing current annual data and corrective actions with those from prior years.
- (e) Assessing the department's progress in addressing sexual abuse.

Supervisors shall forward all information to the PREA Coordinator, while maintaining a copy for their files. This data shall be securely maintained.

Upon receipt of a completed investigation, the PREA Coordinator or his/her designee, shall compile all the incidents on an annual basis, using the most recent version of the Survey of Sexual Violence form from the Department of Justice. Upon request, the Sheriff's Office will provide all data from the previous calendar year to the Department of Justice. A copy of this data shall be maintained for no less than ten years.

The information from all the incidents in the prior calendar year will be reviewed and compiled into an annual report. The report shall also include corrective actions for the jail, along with a comparison to the previous year's data, and submitted to the Sheriff for review. Upon approval of the Sheriff, the report shall be posted on the Sheriff Office website annually, after all necessary redactions have been made, pursuant to California Penal Code § 293. The reports shall be approved by the Captain and made available through the department website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88)."

2022 PREA Annual Report remains on the Marin County Sheriff's website uploaded on 1/5/23 available to the public. Statistics identified sexual abuse and sexual harassment annually from 2016 thru 2022. Per Standard provision 115.88(d) statement on the report, "Personal Identifying Information has been redacted from the Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail.

1. Agency to upload 2023 annual aggregated sexual abuse data via the Sheriff's Office public website to make it readily available to the public after redactions have been initiated.

115.88(c): PREA Policy 60614 Data Reviews mandates that "The information from all the incidents in the prior calendar year will be reviewed and compiled into an annual report. The report shall also include corrective actions for the jail, along with a comparison to the previous year's data, and submitted to the Sheriff for review. Upon approval of the Sheriff, the report shall be posted on the Sheriff Office website

annually, after all necessary redactions have been made, pursuant to California Penal Code § 293. Thereports shall be approved by the Captain and made available through the department website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88)." Interview with Agency Head or designee indicates that he approves the annual reports written pursuant to Standard 115.88.

115.88(d): Agency reports that the Annual Report be approved by the Sheriff and posted on the Sheriff's Office website annually after all necessary redactions have been made pursuant to California Penal Code Section 293. Annual reports include a narrative which states that personal identifying information has been redacted from Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail.

Interview with the PREA Coordinator indicates that the Agency prepares an annual report of findings from its data review and any corrective actions for each facility, as well as the agency as a whole. No names of IPs or details of allegations are provided.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.88(b) and corrective action is required.

Corrective Action Recommended:

115.88(b): 2022 PREA Annual Report remains on the Marin County Sheriff's website uploaded on 1/5/23 available to the pubic. Statistics identified sexual abuse and sexual harassment annually from 2016 thru 2022. Per Standard provision 115.88(d) statement on the report, "Personal Identifying Information has been redacted from the Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail.

1. Agency to upload 2023 annual aggregated sexual abuse data via the Sheriff's Office public website to make it readily available to the public after redactions have been initiated.

Corrective Action Completion 9/18/24 :

115.88(b): Agency uploaded 2023 PREA Annual Report on the Agency website annual aggregated sexual abuse data and Personal Identifying Information Statement

"Personal Identifying information has been redacted from Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail", has been included in the narrative of the 2023 PREA Annual Report

Agency provided assessment of their progress in conducting safety checks and the

	<p>mandate of zero tolerance of sexual abuse and sexual harassment. Agency is committed to maintaining a program of education, prevention, data collection, detection, investigation, administrative sanctions and criminal prosecution against perpetrators.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.88(b) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.88.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.89(a): PREA Policy 606.15 Records mandates that "All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws. The Department shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Department, plus five years (28 CFR 115.71). All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89)."</p> <p>Interview with the PREA Coordinator indicates that data is securely maintained by utilizing the Sheriff's Department Shared Drive Firewall and Drive Access where only Administration has access.</p> <p>RECORD STORAGE - During the Onsite Audit, the auditor, accompanied by the PREA Compliance Manager gained access to the only Locked Documents Storage Unit. The unit was a large locked closet secured and locked with the PREA Compliance Manager and the PREA Coordinator who maintains the security. Within the Locked Storage unit (located in the Sheriff's Training Room off the Administration Hallway) Logs, investigations, grievances.</p> <p>115.89(b): PREA Policy 606.14 Data Reviews mandates that "All aggregated sexual abuse data from Marin County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the</p>

department website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89)."

2022 PREA Annual Report remains on the Marin County Sheriff's website uploaded on 1/5/23 available to the public. Statistics identified sexual abuse and sexual harassment annually from 2016 thru 2022. Per Standard provision 115.88(d) statement on the report, "Personal Identifying Information has been redacted from the Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail.

1. Agency to upload 2023 annual aggregated sexual abuse data via the Sheriff's Office public website to make it readily available to the public after redactions have been initiated.

2. Annual Report to provide an assessment of the agency's progress in sexual abuse and aggregated sexual abuse data from Marin County Jail. Please upload 2023 Annual Report to the Supplemental File to make it available to the public after specific material from reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

115.89(c): PREA Policy 606.14 Data Reviews mandate that "All aggregated sexual abuse data from Marin County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the department website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89)."

PREA Policy 606.15 Records, mandates that all documents pertaining to investigations shall be securely retained by the PREA Coordinator or designee for not less than 10 years.

115.89(d): PREA Policy 606.15 Records, mandates that "All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws.

The Department shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Department, plus five years (28 CFR 115.71)."

"All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89)."

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.89(b) and corrective action is required.

Corrective Action Recommended:

	<p>115.89(b): 2022 PREA Annual Report remains on the Marin County Sheriff's website uploaded on 1/5/23 available to the public. Statistics identified sexual abuse and sexual harassment annually from 2016 thru 2022. Per Standard provision 115.88(d) statement on the report, "Personal Identifying Information has been redacted from the Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail.</p> <p>1. Agency to upload 2023 annual aggregated sexual abuse data via the Sheriff's Office public website to make it readily available to the public after redactions have been initiated.</p> <p>2. Annual Report to provide an assessment of the agency's progress in sexual abuse and aggregated sexual abuse data from Marin County Jail. Please upload 2023 Annual Report to the Supplemental File to make it available to the public after specific material from reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.</p> <p><u>Corrective Action Completion 9/18/24 :</u></p> <p>115.89(b): Agency uploaded 2023 PREA Annual Report on the Agency website annual aggregated sexual abuse data and Personal Identifying Information Statement</p> <p>"Personal Identifying information has been redacted from Annual Report as it may present a clear and specific threat to the safety and security of the Marin County Jail", has been included in the narrative of the 2023 PREA Annual Report</p> <p>Agency provided assessment of their progress in conducting safety checks and the mandate of zero tolerance of sexual abuse and sexual harassment. Agency is committed to maintaining a program of education, prevention, data collection, detection, investigation, administrative sanctions and criminal prosecution against perpetrators.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.89(b) completed during the corrective action period. The auditor has determined that the agency/facility has met the standard provisions and complies with Standard 115.89.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401(a): Marin County Sheriff's Office maintains a single facility, Marin County

Jail. Agency does not utilize or maintain any private organizations on behalf of the Agency. The Jail has successfully completed two previous PREA Audits 2017 & 2020. Marin County Jail is currently undergoing a third PREA Audit which began in 2024. The Onsite Audit was conducted in August 2, 2024.

115.401(b): Marin County Sheriff's Office maintains a single facility, Marin County Jail. Agency does not utilize or maintain any private organizations on behalf of the Agency. The Jail has successfully completed two previous PREA Audits 2017 & 2020. Marin County Jail is currently undergoing a third PREA Audit which began in 2024. The Onsite Audit was conducted in August 2, 2024. This is the second year of the current audit cycle.

401(h): During the current PREA Audit, the Agency allowed the auditor full access to all areas within the facility in order to observe the facility's operations. Auditor observed all areas of the Marin County Jail during the Onsite Audit.

115.401(i): Agency has provided the auditor with any and all requested documentation and copies of any relevant electronically stored information.

115.401(m): Agency permitted the auditor to conduct private interviews with Incarcerated Persons (IPs), selected by auditor, housed in the Marin County Jail.

401(n): During the Onsite Audit, auditor observed Notice of Audit posters available throughout the facility in each housing unit, visiting areas, facility entrance lobby, medical, Intake, IP work areas, etc. Informal interviews with IPs conducted during the Onsite Audit verifies the posted Notice of Audit were made available at least 6 weeks prior to the Onsite Audit.

Auditor has received three confidential letters from IPs through the mail. The legal mail process is as follows:

PROCESSES FOR SENDING AND RECEIVING MAIL (MAIL DROP BOXES/ MAILROOM):

Outgoing Mail - IPs place mail in housing unit mail box which is collected directly from IP in each housing unit. Upon Deputy break or end of shift, the housing deputy moves mail to the (Movement Relief Deputy) MRD office on Housing level. The MRD office stamps the envelopes and does not open them. Stamped envelopes are placed in giant bin and moved to lobby office. In the morning, mail is collected by USPS.

INCOMING MAIL - Legal mail is dropped off by DA office, Private Lawyer, etc.

Legal Mail is given to IP in view of deputy and opened by IP.

REGULAR MAIL - Mail goes through 3rd Party called Pigeonly, who opens and scans the mail. Custody staff goes through the scanned mail returned from Pigeonly, where staff reviews and determines if mail is approved to be sent or rejected. If rejected, scanned mail is returned to the Agency with QR code (No Originals) for Agency staff to review a second time. Once 2nd review is completed,, mail is returned to sender. If mail was initially approved, mail is provided to IP.

CONCLUSION:

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.401.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.403(f): The PREA 2021 BJA Auditor Report and PREA 2017 BJA Auditor Report are both located on the Marin County Sheriff's website:</p> <p>The PREA Summary Audit Reports are available to the public and can be located on the Marin County Sheriff's website at Detention Bureau - Marin County Sheriff's Office. On this site page, scroll down and you will see a lateral option bar with "Overview, Jail Booking Log, PREA, Pigeonly and Visitation" listed. Under the PREA tab you will see all our PREA annual reports, including the "PREA 2021 BJA Auditor Report" and the "PREA 2017 BJA Auditor Report."</p>

Appendix: Provision Findings		
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.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.12 (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.)	na
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	na

	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.)	yes
	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	yes

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	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)?	yes
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	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	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	yes

	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?	
	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 consent or refuse?	yes
	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 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?	yes
	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 agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
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.)	na
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
115.22 (b) Policies to ensure referrals of allegations for investigations		
	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
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
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
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	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	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to 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	yes

	suspicious 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.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
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 health care practitioners who work regularly in its facilities.)	yes
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	yes

	screening instrument?	
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 criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	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
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess 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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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 being sexually abusive, to inform: Education 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: 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
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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 are at high risk of sexual victimization have access to: Programs 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: 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 can be arranged?	yes
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	yes

	anonymous upon request?	
	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
115.51 (d)	Inmate reporting	
	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.	no
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	yes

	this standard.)	
	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, 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.)	yes
	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
115.52 (e)	Exhaustion of administrative remedies	
	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? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the 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,	yes

	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.)	
	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 understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (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	yes

	abuse or sexual harassment or retaliation?	
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 confidentiality, at the initiation of services?	yes
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 required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that 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	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that 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 with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	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	yes

	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?	
	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	yes

	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).)	
	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
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (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
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (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 committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following 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
115.73 (d)	Reporting to inmates	
	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	yes

	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?	
115.73 (e)	Reporting to inmates	
	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 have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (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?	no
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	yes

	evidence sufficient to substantiate the allegation?	
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.)	na
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).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	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.)	na
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).	yes
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
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
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
115.82 (c)	Access to emergency medical and mental health services	
	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
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (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.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 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.)	yes
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.)	na

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
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(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, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
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.)	na
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	yes

	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?	
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
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (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.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	no
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	Audit contents and findings	

(f)			
	<table><tr><td data-bbox="316 174 1289 568"><p>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.)</p></td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	<p>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.)</p>	yes
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