

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Interim Audit Report: Click or tap here to enter text. N/A

If no Interim Audit Report, select N/A

Date of Final Audit Report: 10/09/2021

Auditor Information

Name: Darnel Carlson	Email: dmcarlson16@gmail.com
Company Name: Click or tap here to enter text.	
Mailing Address: P.O. Box 267	City, State, Zip: Pillager, MN 56473
Telephone: 218-831-9636	Date of Facility Visit: August 24-25, 2021

Agency Information

Name of Agency: McKenzie County Correctional Facility			
Governing Authority or Parent Agency (If Applicable): Joint Powers Board			
Physical Address: 1201 12th St. SE Suite C		City, State, Zip: Watford City, ND 58854	
Mailing Address: Click or tap here to enter text.		City, State, Zip: Click or tap here to enter text.	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency Website with PREA Information: https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act			

Agency Chief Executive Officer

Name: Travis Olson	
Email: trolson@co.mckenzie.nd.us	Telephone: 701-842-2565

Agency-Wide PREA Coordinator

Name: Krista Lickert	
Email: klickert@co.mckenzie.nd.us	Telephone: 701-842-2565
PREA Coordinator Reports to: Administrator Travis Olson	Number of Compliance Managers who report to the PREA Coordinator: 0

Facility Information

Name of Facility: McKenzie County Correctional Facility

Physical Address: 1201 12th St. SE Suite C

City, State, Zip: Watford City, ND 58854

Mailing Address (if different from above):

Click or tap here to enter text.

City, State, Zip: Click or tap here to enter text.

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information:

<https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: Click or tap here to enter text.)

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:

North Dakota Department of Corrections annual inspection report

Warden/Jail Administrator/Sheriff/Director

Name: Travis Olson

Email: trolson@co.mckenzie.nd.us

Telephone: 701-842-2565

Facility PREA Compliance Manager

Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

Facility Health Service Administrator N/A

Name: Anita Pederson / ANOVA Family Health Center

Email: Click or tap here to enter text.

Telephone: 701-842-6400

Facility Characteristics

Designated Facility Capacity:

135

Current Population of Facility:

19

Average daily population for the past 12 months:	34
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males
Age range of population:	18-99
Average length of stay or time under supervision:	33 days
Facility security levels/inmate custody levels:	Minimum; medium; maximum
Number of inmates admitted to facility during the past 12 months:	1270
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:	409
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:	81
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input type="checkbox"/> Federal Bureau of Prisons <input type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A
Number of staff currently employed by the facility who may have contact with inmates:	31
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	10
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	0
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	2
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	2

Physical Plant

<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	1
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	9
Number of single cell housing units:	5
Number of multiple occupancy cell housing units:	4
Number of open bay/dorm housing units:	0
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	11
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Medical and Mental Health Services and Forensic Medical Exams	
Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.)
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Investigations

Criminal Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</p>	<p>2</p>
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<p>When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</p>	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p>	<input checked="" type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input checked="" type="checkbox"/> Other (please name or describe: ND BCI) <input type="checkbox"/> N/A
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Administrative Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</p>	<p>2</p>
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<p>When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</p>	<input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p>	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A
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Audit Findings

Audit Narrative (including Audit Methodology)

The Prison Rape Elimination Act (PREA) onsite audit of the McKenzie County Correctional Facility (MCCF) in Watford City, North Dakota, was conducted on August 24-25, 2021.

Documentation reviewed to demonstrate compliance with the PREA standards includes facility policies, procedures, forms, educational materials, grievances, training curriculum, organizational chart, posters, PREA brochures, inmate handbook, employee training records, PREA investigations, housing contracts, Memorandum of Understanding (MOU) for advocacy services, inmate training acknowledgments, North Dakota Department of Corrections and Rehabilitation (NDDOCR) facility inspection report, risk assessment form, PREA information on Agency website, completed sexual abuse incident review, and the pre-audit questionnaire.

The PREA Coordinator provided a copy of the staff schedule and inmate roster on the first day of the onsite audit.

There were 22 inmates in custody on the first day of the onsite audit. Concerns over the spread of the Coronavirus have reduced the number of inmates in custody.

The audit notices were posted in visible areas throughout the facility six weeks before the audit and during the onsite audit. The PREA Coordinator emailed a confirmation that the notices were posted, and inmates confirmed the notices had been posted during their interviews. I did not receive any inmate or staff correspondence throughout the audit process.

During the onsite audit on August 24-25, 2021, I was given a conference room in jail administration to work and conduct private interviews with staff. Sixteen personal interviews were conducted with facility staff. Correctional staff is trained to work in all jail areas; eight interviews were conducted with correctional staff and included random staff, intake, and risk screening questions. Also interviewed were two Sergeants who conduct unannounced rounds, the Chief of Security who is responsible for maintaining the staff schedule, a medical practitioner, contractor, the Lieutenant who is responsible for monitoring for retaliation, Quality Assurance Director/PREA Coordinator (Incident review team member and administrative investigator), and the Jail Administrator (Agency Contract Administrator and Administrative/Human Resources). The facility employs thirty-two full-time employees, the Jail Administrator, the Quality Assurance Director/PREA Coordinator, Chief of Security, Lieutenant, four Sergeants, twenty-two correctional officers, a Registered Nurse, and an administrative technician.

Confidential interviews with inmates were conducted in the A and B housing unit interview rooms. Ten random inmates were interviewed, which meets the required number of inmate interviews based on the jail population of 22. Two inmates identified that met the criteria of targeted classes were interviewed. Both inmates verified during their interviews that the facility is providing information and services according to the PREA standards.

During the past twelve months, the facility reported four substantiated, unsubstantiated, or unfounded sexual abuse and harassment allegations.

Inmate allegations Against Staff:

One unfounded allegation of sexual abuse

One unfounded allegation of sexual harassment

Inmate Allegations Against Inmates:

One substantiated allegation of sexual harassment (referred to the criminal investigator - prosecutor declined to charge)

One unfounded allegation of sexual harassment

The facility received two reports from inmates that they were sexually abused in another facility. Both reports were forwarded to the head of each Agency within 72 hours. The facility received zero reports from another facility that an inmate was sexually abused or harassed at its facility.

The PREA Coordinator conducted a facility tour. All areas of the facility were toured, the physical plant consists of jail administration offices, central control room, two housing units with program and interview rooms, library, booking, officer work area, vehicle sallyport, property storage room, medical unit, professional visitor rooms, ITV room, kitchen, laundry, and additional administrative offices. I observed the location and placement of cameras, staff supervision of inmates, placement of posters, PREA information, and security monitoring. I observed toilets and sinks in each cell; the showers in each housing pod allowed inmates privacy. I was given access to all areas in the facility and talked to staff and inmates informally during the visit.

Staff reported feeling safe at work and expressed confidence their administration would take any reported allegation of sexual abuse, harassment, or retaliation seriously, and a full investigation would be conducted.

Inmates also reported feeling safe living in the facility and believed the administration would investigate allegations of reported sexual abuse.

On May 7, 2018, the facility was found to fully comply with the PREA standards.

Zero-tolerance of sexual abuse and harassment has been part of the Agency's culture since its opening in 2017. The expectations of administration to have professional employees, zero-tolerance, and maintain a neat and orderly facility is displayed in the professionalism of the staff, the neat and orderly facility, staffs knowledge of their responsibilities in preventing, detecting, and responding to sexual abuse and harassment, and treatment of inmates.

The facility has a signed Memorandum of Understanding (MOU) with the Family Crisis Shelter <https://www.familycrisisshelter.com/who-we-are/contact.html> to provide emotional support services and accept third-party sexual abuse and sexual harassment allegations for the facility.

The advocate's office is located in the law enforcement building with easy access to meet with an inmate in the jail.

Inmate victims of sexual abuse would be transported to the McKenzie County Hospital located in Watford City, North Dakota. <https://www.mckenziehealth.com/> The hospital has a room designated to conduct examinations by a SANE practitioner twenty-four hours a day and seven days a week.

Facility Characteristics

The McKenzie County Correctional Facility (MCCF) is a grade one correctional facility under the North Dakota Department of Corrections and Rehabilitation (NDDCR).

The North Dakota Department of Corrections and Rehabilitation inspected the facility on February 17 & 18, 2021. The final standards and compliance calculation was 107 – compliance with standards and 1- non-applicable standards from a total of 108 standards. To obtain full compliance with the inspection standards, the facility must be in compliance with the PREA standards.

Standard 023 – Intake File Content Requirements

Intakes must be given a PREA notification, screening, and acknowledgment; correctional facilities shall complete the PREA screening and acknowledgment prior to general population assignment.

Standard 027 – Inmate Orientation

- Upon admission, or as soon as practical, staff shall provide inmates orientation information in a language the inmate understands, including relevant information about:

1. PREA Information

Standard 036 – Searches-Clothed and Unclothed

- Correctional facilities shall have a written policy and procedure for clothed and unclothed searches of inmates. The policy and procedure must include the following:
 1. Cross-gender unclothed body searches may not be conducted on male or female inmates absent exigent circumstances. Facility staff shall document all cross-gender unclothed searches of male or female inmates, including the exigent circumstances for the search.
 2. PREA requirements, including:
 3. Staff may not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.
 4. If the inmate's genital status is unknown, it may be determined through conversation 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.
 5. If it is determined either through assessment or through admission by the inmate that the inmate is transgender or intersex, the person responsible for the screening or the search shall ask the inmate if they prefer to be searched by a male or female officer and document the response.
 6. If the inmate does not have a preference or if a search must be completed by someone not of the inmate's preferred gender because of security concerns, available staff may conduct the search and document the reason the person was searched by someone, not of the inmate's preferred gender.

Standard 103 – Staff Orientation Training

Correctional facilities shall have a written policy and procedure requiring all correctional officers to participate in a documented orientation training program prior to independent assignment.

- The orientation program must meet the particular needs of the correctional facility and must include at a minimum:
 1. Prison Rape Elimination Act (PREA)

The MCCF is part of the McKenzie County Law Enforcement Center, a two-story building located at 1201 12th Street South East, Suite C in Watford City, North Dakota. The facility opened in April of 2017 with a maximum capacity of 135 inmates. There were 18 adult male inmates and four adult female inmates in custody on the first day of the PREA audit. The policy prohibits housing juvenile inmates in the facility. The facility houses pretrial and post-conviction inmates. The facility maintains a contract with Cass County, North Dakota, to house Cass County inmates. The facility occasionally holds for the U.S. Immigration and Customs Enforcement (ICE) for a limited time.

The facility has one main corridor that all areas are located off. There are two housing units; each unit is divided into smaller inmate housing pods. Each housing unit has an officer work station facing the housing pods. Each pod has tinted large windows in the dayroom that restrict inmate visibility from inside the pod and give officers direct observation of the pod and dayroom. The pod units are similar in design with an upper and lower tier of cells, stairs from the dayrooms to the upper-tier cells, and private showers on the upper and lower tiers. The dayrooms are on the lower tier, each dayroom is equipped with a telephone, television, and a kiosk for inmates to use. Housing unit A has four housing pods, two pods have eight single bunked cells, one pod has eight double-bunked cells, and the last pod has sixteen double-bunked cells.

Housing unit B has five housing pods, two pods have eight single bunked cells, one pod has sixteen single bunked cells, and two pods with eight double-bunked cells. Every cell contains a toilet and sink. There is a hallway between housing units A and B; each housing unit has a security door off the main hallway. Both housing units have a program room, interview room, and recreation room. Currently, all inmates are assigned an individual cell.

The booking area includes:

- Ten individual holding cells (seven cells have beds, three cells with benches)
- One safety cell
- Group holding cell
- Dress out/release cell
- Staff work station

The inmate property storage room and inmate change-out room are located in booking. There is camera coverage of the property room.

There is an officer work area between booking and the vehicle sallyport with a temporary holding cell and intoxilyzer room. There is an opening that inmates hand their clothing to the officer, and the officer hands inmate their jail clothing. When an inmate is changing clothing, the inmate removes their clothing in the change room; there is a window the officer stands behind to view the inmate changing.

The nurse's office is located off booking. The medical unit encompasses three examination rooms, an inmate restroom, a storage closet, and a pharmacy.

Central Control monitors the facility's perimeter, and grants access into and out of the facility. The officer posted in central control is also responsible for monitoring the facility surveillance systems. The main control post is staffed 24 hours, seven days a week. Control is centrally located within the facility and has direct sight into the two recreation areas.

Jail administration has a conference room, offices for the jail administrator and quality assurance director/PREA coordinator, and an office support technician.

There is a laundry room, kitchen, locked storage areas, interview rooms, ITV room, restrooms, and additional administrative officers within the secured perimeter of the facility.

There is a locked security slider off the main hallway to the kitchen, chief of security's office, and laundry.

The facility has cameras strategically located throughout the facility to enhance its ability to protect inmates from sexual abuse and sexual harassment, including the laundry room and kitchen.

The facility contracts with Summit Food Service <https://summitfoodservice.com/> to manage the kitchen and prepare inmate meals.

Inmate meals are prepared in the kitchen and delivered to the housing units. Inmate workers help prepare the inmate meals under the supervision of contracted food service staff. The meals are placed on food trays, delivered to the housing unit, and served to the inmates.

Inmate workers are used in the laundry, which is responsible for cleaning the facility's linens, towels, and clothing. The inmate workers in the laundry are supervised by security staff.

The facility contracts with Dr. Anita Pedersen from ANOVA Family Health Center located in Watford City, North Dakota, <https://anovafamilyhealth.com/> and employs a registered nurse to provide health care delivery to the inmates.

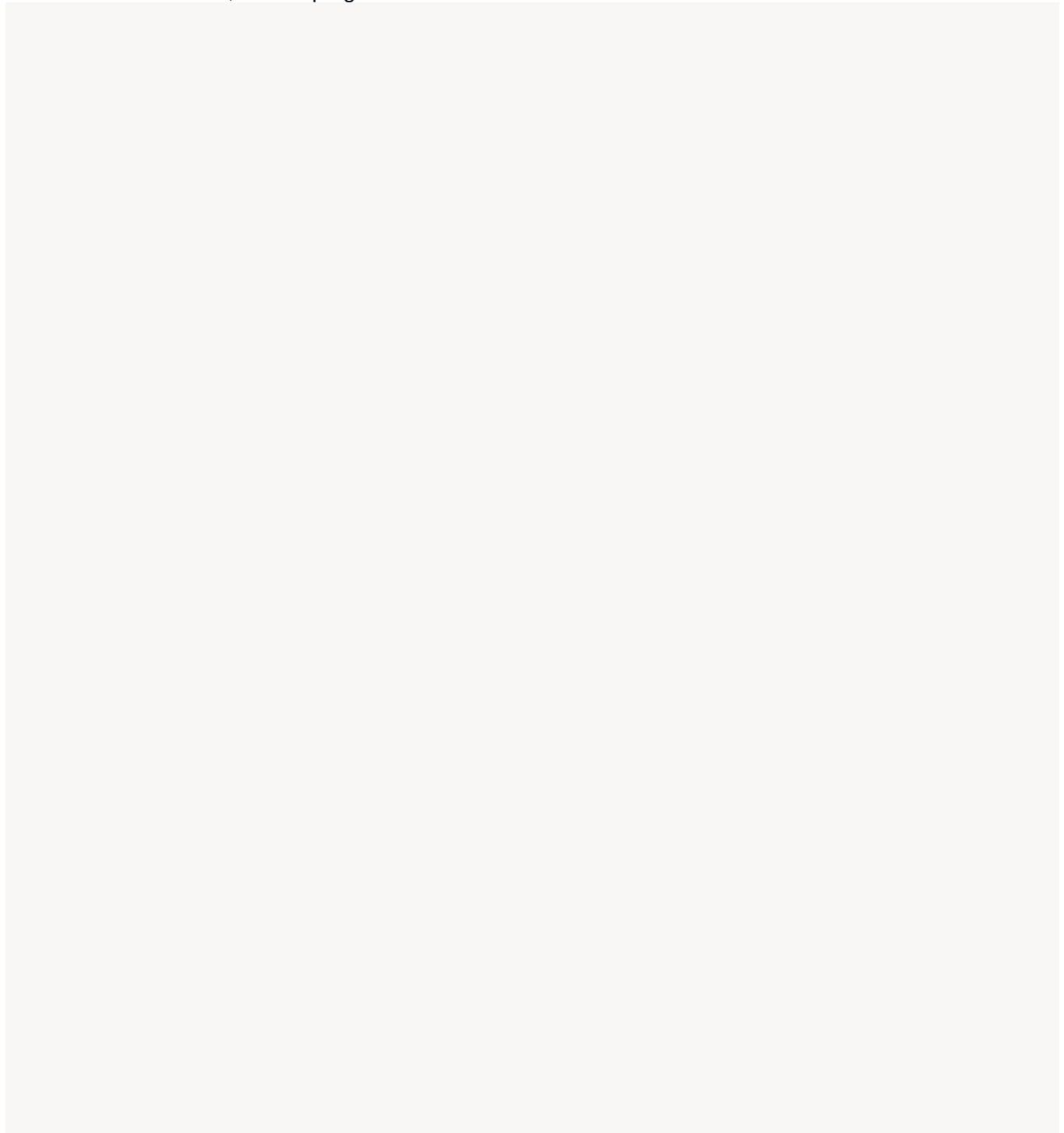
The facility has a library; there is a computer in both housing units for inmate access to the law library.

The facility offers a variety of programs for inmates:

Ministry programs

Work release

Work release ministry
Inmate treatment release program
Alcohol Anonymous
Healthy relationship program
Mentorship services
Job placement
Prenatal counseling
Behavioral programming for tribal members
Inmate visitation with family and friends is conducted using video visitation.
Due to the coronavirus, inmate programs have been limited.



Summary of Audit Findings

There was no corrective action needed. The facility met the 45 standards for prisons and jails.

Auditor Note: *No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.*

Standards Exceeded

Number of Standards Exceeded: 1
List of Standards Exceeded: 115.41

Standards Met

Number of Standards Met: 44

Standards Not Met

Number of Standards Not Met: 0
List of Standards Not Met: 0

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- 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 No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No 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.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility has implemented a zero-tolerance policy as detailed in policy #16-082, which comprehensively addresses the Agency's approach to preventing, detecting, and responding to

all forms of sexual abuse and sexual harassment. The policy outlines prohibited behavior and contains basic definitions outlined in the PREA standards. The policy creates the foundation for the Agency's training efforts with inmates, staff, volunteers, and contractors.

B. The facility has a designated PREA Coordinator, Quality Assurance Director, and PREA Coordinator. The PREA Coordinator reports to the Jail Administrator and reports to have sufficient time and authority to develop, implement, and oversee the Agency's efforts toward PREA compliance. The PREA Coordinator's responsibilities are clearly outlined in policy #16-082.

C. This paragraph is not applicable; the Agency operates one facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Facility organizational chart
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. This paragraph is not applicable; the facility does not contract with any entity for the confinement of its inmates.
- B. This paragraph is not applicable; the facility does not contract with any entity for the confinement of its inmates.

The facility has a housing contract with Cass County, North Dakota, for the confinement of their inmates.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Housing contract with Cass County, North Dakota
- Interview with Jail Administrator Travis Olson

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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
 No

- 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 No NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes No
- 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 No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

115.13 (b)

- 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.)
 Yes No NA

115.13 (c)

- 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 No
- 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 No
- 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 No

115.13 (d)

- 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 No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The facility reports that the average daily population is 35. On the first day of the onsite audit, there were 22 inmates in custody. The staffing plan is based on 135 inmates.

- A. The facility has a formalized written staffing plan that includes considerations (1-11) in paragraph (a) of this standard.
- B. The facility does not deviate from the staffing plan. The Chief of Security is responsible for maintaining minimum staffing levels.
- C. Facility policy #16-082 states at least once every year, the Jail Administrator, in collaboration with the PREA Coordinator, will review, determine, and document whether any adjustments are needed to the staffing plan.
- D. Facility policy #16-082 outlines the requirement that Sergeants conduct unannounced rounds of the facility at least once per shift. Staff is prohibited from alerting other staff members the rounds are occurring unless the announcement is related to the legitimate operational functions of the facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Staffing plan
- Administrative agenda minutes
- Unannounced rounds log
- Unannounced rounds video review
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator)
- Interview with a Sergeant

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- 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].) Yes No NA

115.14 (b)

- 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].) Yes No 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].) Yes No NA

115.14 (c)

- 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].) Yes No 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].) Yes No 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].) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

A. This standard is not applicable; the facility does not house adjudicated delinquent youths.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- 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 No

115.15 (b)

- 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 No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (d)

- 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 No
- 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 No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- 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 No
- 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 No

115.15 (f)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 prohibits staff from conducting cross-gender unclothed searches or cross-gender visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by medical practitioners. In the past twelve months, the facility reports zero cross-gender strip searches or visual body cavity searches of inmates. Also, in the past twelve months, there have been zero cross-gender strip searches or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by nonmedical staff.
- B. Facility policy #16-082 prohibits cross-gender pat-down searches of inmates except in exigent circumstances. In the past twelve months, the facility reports zero pat-down searches of female inmates conducted by male staff. There have been zero pat-down searches of female inmates by male staff due to an emergency in the past twelve months.
- C. Facility policy #16-082 requires jail staff to document all cross-gender strip searches, body cavity searches of inmates, and cross-gender pat-down searches of inmates.
- D. Facility policy #16-082 allows inmates to shower, perform bodily functions, and change clothing without a nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or such viewing is incidental to routine checks.
- E. Facility policy #16-082 prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining an inmate's genital status.
- F. The facility has trained 100 percent of its staff to conduct cross-gender pat-down searches and searches of transgender or intersex inmates professionally and respectfully.

Random staff and inmate interviews verified opposite gender staff would announce their presence when entering their housing unit. Inmates report they can dress, shower, and perform bodily functions out of view of staff of the opposite gender.

Staff and inmates confirmed staff of the opposite gender does not conduct pat-down or strip searches of opposite gender inmates.

Staff receives training on conducting cross-gender pat searches and searches of transgender and intersex inmates during orientation and annually after that.

During the onsite audit, no inmates who met the criteria of this standard were in custody.

The facility must comply with Standard 036 – *Searches-Clothed and Unclothed*.

- *Correctional facilities shall have a written policy and procedure for clothed and unclothed searches of inmates. The policy and procedure must include the following:*
 1. *Cross-gender unclothed body searches may not be conducted on male or female inmates absent exigent circumstances. Facility staff shall document all cross-gender unclothed searches of male or female inmates, including the exigent circumstances for the search.*
 2. *PREA requirements, including:*
 3. *Staff may not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.*
 4. *If the inmate's genital status is unknown, it may be determined through conversation 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.*
 5. *If it is determined either through assessment or through admission by the inmate that the inmate is transgender or intersex, the person responsible for the screening or the search shall ask the inmate if they prefer to be searched by a male or female officer and document the response.*
 6. *If the inmate does not have a preference or if a search must be completed by someone not of the inmate's preferred gender because of security concerns, available staff may conduct the search and document the reason the person was searched by someone, not of the inmate's preferred gender.*

To be in full compliance with their North Dakota Department of Corrections and Rehabilitation Facility Inspection Report.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Training records
- Random staff interviews
- Random inmate interviews
- Observations during the facility tour

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- 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 No
- 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 No

- 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 No
- 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 No
- 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 No
- 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 No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- 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 No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- 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 No
- 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 No

115.16 (b)

- 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 No

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?
 - Yes No

115.16 (c)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility ensures essential information about PREA is continuously and readily available or visible to inmates through posters, inmate handbooks, orientation videos, and PREA brochures. Facility policy #16-082 outlines the responsibilities of the facility to accommodate inmates with disabilities.
- B. The facility has a contract with CTS LanguageLink to provide foreign language translation and video interpretation for deaf and hard of hearing. PREA documents available in Spanish, "PREA-What you need to know" video can be shown with closed caption and multiple languages using CT LanguageLink. Staff will review PREA education materials with inmates who have intellectual, psychiatric, or speech disabilities.
- C. Facility policy #16-082 prohibits using inmate interpreters except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-responders, and investigation of the inmate's allegations.

During the onsite audit, there was one inmate who met the criteria of this standard were in custody.

The facility reports zero instances in the past twelve months of inmate interpreters or another type of inmate assistant to assist first responder duties or investigate the inmate's allegation.

Staff interviews confirmed only qualified interpreters would be used to communicate with the inmate except in limited instances.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson

- Interview with staff
- Interview with an inmate with disabilities

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- 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 No
- 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 No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- 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 No
- 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 No
- 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 question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? Yes No
- 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 No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes No

- 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 No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- 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 No

115.17 (f)

- 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 No
- 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 No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** Facility policy #16-082 prohibits the hiring or promotion of staff members or enlisting the services of contractors who may have contact with inmates who has the prohibited conduct specified in paragraph (a) of this standard.
- B.** Facility policy #16-082 requires all incidents of sexual harassment to be considered in determining whether to hire or promote anyone or enlist the services of any contractor who may have contact with inmates.
- C.** Facility policy #16-082 states before hiring new employees who may have contact with inmates, the facility will perform a criminal background record check and, consistent with Federal, State, and local law, do its best 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. The PREA Coordinator is a trained NCIC operator and completes background checks on staff, contractors, and volunteers.
- D.** Facility policy #16-082 requires a criminal background record check to be completed before enlisting the services of any contractor or volunteer.
- E.** Facility policy #16-082 requires criminal record background checks conducted every five years on employees and contractors who may have contact with inmates.
- F.** During the interview, applicants who may have contact with inmates are asked about previous misconduct described in paragraph (a) of this standard. The facility does not use written self-evaluations as part of reviews of current employees. The facility imposes upon employees a continuing affirmative duty to disclose any such misconduct.
- G.** Facility policy #16-082 outlines the requirement that material omissions or providing false information related to paragraph (a) of this standard are grounds for termination.
- H.** Unless prohibited by law, the facility will provide information on substantiated allegations of sexual abuse or harassment involving a former employee upon receiving a request from an institutional employer with whom the employee has applied to work.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator)
- Facility forms
- Employment records

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- 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.)
 Yes No NA

115.18 (b)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. This standard is not applicable; the Agency has not acquired or made substantial modifications to its facility since the last PREA audit.
- B. This standard is not applicable; the Agency has not installed or updated its video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- 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 No NA

115.21 (b)

- 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 No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.21 (c)

- 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 No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- 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 No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- 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 No NA

- Has the agency documented its efforts to secure services from rape crisis centers?
 Yes No

115.21 (e)

- 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 No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- 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.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** The facility uses trained investigators to conduct administrative investigations of sexual abuse and harassment. The facility has a signed Memorandum of Understanding (MOU) with the Watford City Police Department (WCPD) to conduct criminal investigations.
- B.** The WCPD will conduct criminal investigations involving inmate-on-inmate sexual abuse and harassment allegations. The North Dakota Bureau of Criminal Investigations (NDBCI) will conduct criminal investigations involving staff-on-inmate sexual abuse and harassment allegations.

- C. Forensic medical examinations will be conducted free of charge to the victim at McKenzie County Hospital located in Watford City, North Dakota [McKenzie County Hospital | McKenzie County Healthcare System \(mckenziehealth.com\)](http://McKenzie County Hospital | McKenzie County Healthcare System (mckenziehealth.com)). SANE Professionals are available 24 hours, seven days a week to perform forensic medical examinations.
- D. The facility has a signed Memorandum of Understanding (MOU) with the Family Crisis Shelter located in Watford City, North Dakota www.familycrisishelter.com to provide advocacy services to inmate victims of sexual abuse.
- E. A victim advocate from the Family Crisis Shelter will be provided at the victim's request to accompany and support the victim through the forensic medical examination process, investigatory interviews, emotional support, crisis intervention, information, and referrals.
- F. The WCPD will investigate according to their Agency policy and procedures for allegations of inmate-on-inmate sexual abuse. The NDBCI will investigate according to their Agency policy and procedures for allegations of staff-on-inmate sexual abuse.

The facility reports there have been zero forensic medical examinations conducted during the past twelve months.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- MOU with the Watford City Police Department
- MOU with the Family Crisis Shelter
- Interview with Krista Lickert (PREA Coordinator)
- Interview with random staff
- Agency website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- 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 No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- 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).) Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** The facility reports that administrative and criminal investigations are completed for all allegations of sexual abuse and sexual harassment. Facility policy #16-082 requires that an administrative or criminal investigations are conducted for all allegations of sexual abuse and harassment. The facility reports four allegations of sexual abuse or harassment in the past twelve months. One allegation was reported to the Watford City Police Department to investigate.
- B.** Facility policy #16-082 requires that an administrative or criminal investigations are conducted for all allegations of sexual abuse and harassment. The information is posted on the Agency's website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>
- C.** The investigative policy is posted on the Agency's website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator)

- Agency website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No?
- 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 No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- 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 No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- 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 No
- 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 No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No

- 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 No

115.31 (c)

- Have all current employees who may have contact with inmates received such training?
 Yes No
- 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 No
- 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 No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 outlines the training topics all employees who have contact with inmates receive on preventing, detecting, and responding to sexual abuse and sexual harassment. All current staff has received training on the eleven topics listed in paragraph (a) of this standard. The facility uses training curriculums from the PREA Resource Center to train staff.
- B. The training is designed for the unique needs of the inmates in the facility.
- C. The facility ensures all employees receive PREA training during orientation and annually after that.
- D. Receipt and understanding of employee PREA training are documented and retained by the PREA Coordinator.

The facility must comply with Standard 103 *Staff Orientation Training*.

Correctional facilities shall have a written policy and procedure requiring all correctional officers to participate in a documented orientation training program prior to independent assignment.

- *The orientation program must meet the particular needs of the correctional facility and must include at a minimum:*
 1. *Prison Rape Elimination Act (PREA)*

To be in full compliance with their North Dakota Department of Corrections and Rehabilitation Facility Inspection Report.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Training curriculum
- Training records
- North Dakota Department of Corrections and Rehabilitation Inspection Report
- Interviews with random staff
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- 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 No

115.32 (b)

- 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 No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** The facility trains all volunteers and contractors who have contact with inmates on their responsibilities regarding sexual abuse and sexual harassment of inmates. Staff contracted

through Summit receive the same training as security staff every two years and receive annual PREA training as part of their Company's training program.

- B. Volunteer and contractor training is based on the services they provide. Unescorted or unsupervised contractors and volunteers receive online or classroom PREA training every two years. Escorted or supervised contractors will review and acknowledge understanding of the Agency's zero-tolerance policy regarding sexual abuse and harassment and how to report incidents.
- C. Receipt and understanding of PREA training are documented and retained by the PREA Coordinator.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with a contracted employee
- Training curriculum
- Training acknowledgments
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- 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 No
- 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 No
- 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 No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)? Yes No

- 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 No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?
 Yes No

115.33 (f)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility reports 1270 inmates have been admitted in the past twelve months, and 81 of those their length of stay was thirty days or more. Inmates are given information on the Agency's zero-tolerance policy upon arrival at the facility. A zero-tolerance poster in booking covers an inmate's right to report, how to report, and victim support services information. Inmates sign an acknowledgment that they have received a copy of the inmate handbook containing information on the Prison Rape Elimination Act of 2003; Understand their right to be free from sexual abuse,

sexual harassment, and retaliation for reporting such incidents; have been informed how to report such incidents, have reviewed the “PREA-What you need to know” video; and have been offered a PREA brochure. Inmates interviewed confirmed signing an acknowledgment form, watching the orientation video, and being given a copy of the inmate handbook.

- B. Inmates are provided comprehensive education within thirty days of intake. The facility offers inmates texting devices; there is a widget on the texting device the inmate can access the orientation video.
- C. Every inmate completes the same intake process.
- D. The facility ensures essential information about PREA is continuously and readily available or visible to clients on posters (English and Spanish) throughout the facility; PREA orientation video has closed caption and multiple languages using the CTS LanguageLink interpreter service and correctional staff and behavioral health staff.
- E. The acknowledgment inmates sign is securely stored in the inmate medical file.
- F. The facility ensures essential information about PREA is continuously and readily available or visible to inmates on posters (English and Spanish) posted throughout the facility, inmate handbook, PREA brochure, PREA orientation video on the texting devices, and the facility information television channel. Inmates interviewed stated PREA information was everywhere.

The facility must comply with Standard 023 – *Intake File Content Requirements*

- *Intakes must be given a PREA notification, screening, and acknowledgment; correctional facilities shall complete the PREA screening and acknowledgment prior to general population assignment.*

And

Standard 027 – *Inmate Orientation*

- *Upon admission, or as soon as practical, staff shall provide inmates orientation information in a language the inmate understands, including relevant information about:*

2. *PREA Information*

To be in full compliance with their North Dakota Department of Corrections and Rehabilitation Facility Inspection Report.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Inmate handbook
- Inmate acknowledgment forms
- PREA informational posters
- PREA brochure
- Orientation video
- North Dakota Department of Corrections and Rehabilitation Inspection Report
- Interviews with inmates
- Interviews with staff

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- 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 No NA

115.34 (b)

- 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 No NA
- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
- Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

115.34 (c)

- 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 No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 outlines the requirement that all investigative staff receives specialized investigation training. The facility investigator interviewed has received specialized training from the National Institute of Corrections, The Moss Group “PREA Specialized Investigations Training” and the North Dakota Department of Corrections and Rehabilitation “Investigating Sexual Abuse in a Correctional Setting.”
- B. The training covered uniform evidence protocol, techniques for interviewing sexual abuse victims, proper use of the 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.
- C. The PREA Coordinator retains training certificates.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with facility investigator (administrative investigations))
- Training certificates

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- 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 No NA
- 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 No NA
- 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 No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA

115.35 (b)

- 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 No NA

115.35 (c)

- 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 No NA

115.35 (d)

- 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 No NA
- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 requires specialized training for medical and mental health care practitioners outlined in paragraph (a) of this standard.
- B. Forensic medical examinations are conducted at the McKenzie County Hospital. The registered nurse is a McKenzie County employee who has completed the Adult/Adolescent Sexual Nurse Examiner Course. Although forensic medical examinations are not conducted at the facility, the SANE training gives the nurse better insight into what the victim has experienced and provide follow-up care plans.
- C. The PREA Coordinator retains training certificates.
- D. The nurse completes the employee training outlined in standard 115.31 paragraph (a).

Policy, Materials, Interviews, and Other Materials Reviewed:

- Facility policy #16-085
- Completed Pre-Audit Questionnaire submitted by the Agency
- Training certificates
- Interview with the registered nurse

**SCREENING FOR RISK OF SEXUAL VICTIMIZATION
AND ABUSIVENESS**

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- 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 No
- 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 No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- 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 No
- 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 No
- 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 No
- 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 No

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- 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 No
- 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 No
- 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 No

115.41 (f)

- 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 No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral? Yes No

- Does the facility reassess an inmate's risk level when warranted due to a request?
 Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? Yes No
- 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 No

115.41 (h)

- 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 No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 outlines the procedures for assessing during intake the inmate's risk of being sexually abused by other inmates or sexually abusive toward other inmates.
- B. Facility policy #16-082 requires the intake screening to occur ordinarily within 72 hours of arrival at the facility.
- C. The facility uses a comprehensive assessment tool to determine if an inmate is a likely victim or predator.
- D. The assessment tool used by the facility considers the criteria outlined in paragraph (d) of this standard.
- E. The assessment tool considers prior acts of sexual abuse, prior convictions for violent offenses, and a history of previous institutional violence or sexual abuse known to the Agency.

- F. Facility policy #16-082 states every inmate within 30 days of admission will receive a reassessment to determine a risk rating of sexual victimization or abusiveness. Facility policy also states a reassessment will be completed at least annually. The facility will also reassess an inmate's risk level within 30 days based on any additional relevant information received since the intake screening.
- G. Facility policy #16-082 requires an inmate's risk level to be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of being abused or being abusive.
- H. Facility policy #16-082 prohibits disciplining inmates for refusing to answer any question on the assessment tool.
- I. The inmate's assigned risk rating is entered into their booking record in the Jail Management System. Assessment tools are stored on the confidential medical drive, limiting access to the Jail Administrator, PREA Coordinator, and Registered Nurse.

The facility exceeds this standard because they complete a reassessment of every inmate within 30 days of admission, complete a reassessment at least annually on all inmates, and prohibit disciplining inmates for refusing to answer any question on the assessment form.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Inmate assessment forms
- Interviews with staff responsible for risk screenings
- Interviews with random inmates
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- 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 No
- 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 No
- 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 No

- 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 No
- 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 No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- 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 No
- 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 present management or security problems? Yes No

115.42 (d)

- 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 No

115.42 (e)

- 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 No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- 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 No NA

- 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 No NA
- 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 solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 outlines the procedures to follow for classifying inmates to manage and separate inmates based on the designated risk rating from the risk assessment to keep separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.
- B. Facility policy #16-082 outlines the Agency's approach to making individualized determinations about how to ensure the safety of each inmate. Interviews with staff confirmed that the safety of every inmate is based on individual determinations gathered from the risk assessment.
- C. Facility policy #16-082 ensures housing placements and programming assignments of transgender and intersex inmates are considered on a case-by-case basis which the PREA Coordinator confirmed.
- D. Facility policy #16-082 requires placement and programming assignments for each transgender and intersex inmate will be reassessed at least twice each year. The PREA Coordinator verified this would be the facility practice.
- E. The PREA Coordinator and staff responsible for risk screening confirmed a transgender or intersex inmate's views' regarding their safety would be given serious consideration.

- F. All the showers in the facility are private. If a transgender or intersex inmate is uncomfortable taking a shower in their housing pod, they could use the private shower located in the booking area.
- G. The facility is not under a consent decree, legal settlement, or legal judgment to place lesbian, gay, bisexual, transgender, or intersex inmates in a dedicated unit.

During the onsite audit, no inmates who met the criteria of this standard were in custody.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with the PREA Coordinator
- Interviews with staff responsible for risk screening

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- 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 No
- 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 No

115.43 (b)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No NA

- If the facility restricts any 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 No NA
- If the facility restricts any 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 No NA

115.43 (c)

- 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 No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- 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 No
- 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 No

115.43 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 prohibits inmates at high risk of sexual victimization from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there are no known alternative means of separation.

- B. The PREA Coordinator verified that inmates placed in segregated housing would have access to programs, privileges, education, and work opportunities, and any restrictions would be documented.
- C. An inmate at high risk of sexual victimization would only be placed in involuntary segregated housing until an alternative means of separation from likely abusers can be arranged. Such an assignment shall not ordinarily exceed thirty days. The PREA Coordinator verified the policy would be followed.
- D. Suppose an inmate is placed in an involuntary segregated housing assignment. In that case, the facility will document the basis for their concerns for their safety and why no alternative means of separation can be arranged.
- E. An inmate's involuntary segregated housing assignment would be reassessed every thirty days.

In the past twelve months, the facility reports there have been zero inmates placed in involuntary protective custody for 1 to 24 hours awaiting completion of an assessment. In the past twelve months, the facility reports zero inmates placed in involuntary segregated housing.

During the onsite audit, there were no inmates at risk of sexual victimization or alleged to have suffered abuse housed in involuntary housing.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Inmate housing assignments

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No

115.51 (b)

- 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 No

- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- 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) Yes No NA

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** The facility provides inmates multiple internal ways to report sexual abuse and harassment, retaliation, and staff neglect. The reporting methods include verbal reporting to any staff member, third-party reporting, inmate request forms, and inmate grievance forms. Inmates received an inmate handbook and were offered a PREA brochure during the intake process. The facility has contact information posted throughout the facility.
- A.** The facility has a signed Memorandum of Understanding (MOU) with the Family Crisis Shelter in Watford City, North Dakota <https://www.familycrisishelter.com/who-we-are/contact.html> to receive and immediately forward inmates' reports of sexual abuse and harassment to the Agency, allowing the inmate to remain anonymous upon request. Contact information for the Bureau of Consular Affairs, the US Department of State, and the Department of Homeland Security is outlined in the inmate handbook.
- C.** Facility policy #16-082 states staff shall accept reports of sexual abuse, and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff interviewed confirmed they

would accept reports from inmates in any form and would document verbal reports as soon as possible. Inmates interviewed knew they could make reports to staff on the kiosk and contact the PREA hotline (Family Crisis Shelter). Inmates knew reports could be made anonymously, and a third party could report on their behalf.

D. Staff may privately report to their supervisor or any other facility supervisor.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16.082
- Completed Pre-Audit Questionnaire submitted by the Agency
- PREA posters
- Inmate handbook
- MOU with the Family Crisis Shelter <https://www.familycrisishelter.com/who-we-are/contact.html>
- Interview with the PREA Coordinator
- Interviews with staff
- Interviews with inmates

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No

115.52 (b)

- 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 No NA
- 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 No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- 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 No NA

115.52 (d)

- 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 No NA
- 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 No NA
- 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 No NA

115.52 (e)

- 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 No NA
- 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 No NA
- 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 No NA

115.52 (f)

- 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 No NA
- 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 No NA
- 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 No NA

- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA

115.52 (g)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility reports one grievance filed alleging sexual harassment in the past twelve months. The facility reports there have been zero emergency grievances filed alleging sexual abuse or sexual harassment.
- B. Facility policy #16-082 states there is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. Inmates are not required to use an informal grievance process or otherwise attempt to resolve an alleged incident of sexual abuse with staff.
- C. Facility policy #16-082 ensures an inmate who alleges sexual abuse can submit the grievance to any staff member and need not be submitted to a staff member who is the subject of the complaint. Such grievance will not be referred to a staff member who is the subject of the complaint.
- D. The facility will issue a final decision within 90 days of the initial filing of the grievance. An extension of up to 70 days may be granted if reasonable to make an appropriate decision. The inmate will be notified in writing of any extension and will provide a date by which a decision will be made.

- E. The facility allows third parties, including inmates, staff members, family members, attorneys, and outside advocates, may assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. The inmate must agree to have the grievance filed on their behalf; their decision will be documented.
- F. Facility policy #16-082 allows inmates to file an emergency grievance alleging a substantial risk of imminent sexual abuse. An emergency grievance will immediately be forwarded to the Jail Administrator for immediate corrective action. The Jail Administrator will provide an initial response within 48 hours and a final response within five days. The grievance and answers will be documented.
- G. Facility policy allows inmates to be disciplined for filing a grievance related to alleged sexual abuse only when there is a determination the inmate filed the grievance in bad faith.

The final decision on the grievance was provided within five days.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Inmate handbook
- Completed grievance reviewed

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- 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 No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- 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 No

115.53 (c)

- 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 No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility has entered into an ongoing Memorandum of Understanding (MOU) for collaborative services with the Family Crisis Shelter <https://www.familycrisisshelter.com/who-we-are/contact.html>. Contact information for these services is posted throughout the facility and outlined in the inmate handbook. Contact information for the Bureau of Consular Affairs, the US Department of State, and the Department of Homeland Security is outlined in the inmate handbook.
- B. The facility posters with the contact information for the Family Crisis Shelter indicate the calls are free and private. Inmates interviewed knew the calls were free and confidential.
- C. The facility maintains an MOU with Family Crisis Shelter located in Watford City, Minnesota, to provide outside support services.

During the onsite audit, there were no inmates who reported sexual abuse in custody.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire
- PREA posters
- Inmate handbook
- MOU with Family Crisis Shelter
- Interview with inmates

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility has established a method for receiving third-party reports of sexual abuse and sexual harassment of inmates. Information on how to report is posted on the Agency's website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>
The facility has a signed Memorandum of Understanding (MOU) with the Family Crisis Shelter to accept third-party reports.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- MOU with the Family Crisis Shelter
- Agency website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>
- Inmate handbook
- PREA reporting poster

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- 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 No
- 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 No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?
 Yes No

115.61 (b)

- 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 No

115.61 (c)

- 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 No
- 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 No

115.61 (d)

- 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 No

115.61 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 requires staff to report immediately 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 facility. Staff interviews confirmed they had received training and understood their responsibility to immediately report any information of sexual abuse or harassment made known to them.
- B. Facility policy #16-082 states apart from reporting to designated supervisors or officials, staff may not reveal any information related to a sexual abuse report to anyone other than the extent

necessary to make treatment, investigation, and other security management decisions. Staff interviewed reported they would immediately notify their supervisor or jail administration.

- C. The nurse interviewed confirmed their reporting duties and disclosed their limitations of confidentiality when completing the fourteen-day assessment.
- D. If the alleged victim is considered a vulnerable adult under state or local vulnerable adult statute, medical or behavioral health staff will report the allegation to the Department of Human Services under applicable mandatory reporting laws.
- E. The Jail Administrator and PREA Coordinator confirmed that all allegations of sexual abuse and harassment are reported to the designated facility investigator as outlined in facility policy. #16-082.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator)
- Interviews with staff
- Interview with a registered nurse
- Completed investigations

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. In the past twelve months, the facility reports zero instances where the facility determined an inmate was subject to a substantial risk of imminent sexual abuse. A review of the policy and interviews with the Jail Administrator and staff confirmed they would take immediate action to protect the inmate.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interviews with random staff

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- 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 No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** Facility policy #16-082 requires the Jail Administrator to notify the head of the facility where the inmate alleged the sexual abuse or sexual harassment occurred.
- B.** The Jail Administrator has to notify the head of that facility as soon as possible but no later than 72 hours.
- C.** Facility policy #16-082 requires the notification to be documented.
- D.** The Jail Administrator ensured that every allegation of sexual abuse or harassment would be investigated.

The facility reported there had been zero allegations of sexual abuse the facility received from other facilities. The facility reported two allegations received by an inmate that they were sexually abused or harassed at another facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Copies of email notifications made to facility head where the alleged abuse occurred

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- 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 No
- 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 No
- 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 No
- 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 No

115.64 (b)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

In the past twelve months, the facility reported zero allegations that an inmate was sexually abused. In the past twelve months, there have been zero allegations where a staff member was notified within a time that still allowed for the collection of physical evidence.

A. Facility policy #16-082 and the coordinated response to PREA incidents detail the duties of the first security staff member to respond.

A security staff first responder is required to:

- Separate the alleged victim and abuser;
- Preserve and protect the crime scene;
- If alleged abuse occurred within the past 96 hours, request the alleged victim not destroy evidence (as detailed in this standard)
- If alleged abuse occurred within the past 96 hours, request the alleged victim not destroy evidence (as detailed in this standard)

B. If the first responder is not a security staff member, facility policy #16-082 requires the person to request that the alleged victim not take any actions that could destroy physical evidence and then notify jail staff.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Coordinated Response sheet
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interviews with random staff
- Interview with a medical practitioner

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

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

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse. The plan outlines responsibilities among staff first responders, medical practitioners, investigators, and facility leadership.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Coordinated response flowchart
- Interview with Jail Administrator Travis Olson

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. North Dakota is a "right to work state"; the facility does not have collective bargaining agreements.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- 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 No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- 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 No

115.67 (c)

- 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 No
- 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 No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- 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 No
- 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 No
- 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 No

- 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 No
- 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 No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? Yes No

115.67 (e)

- 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 No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** The facility reports that there have been zero incidents of retaliation reported, known, or suspected in the past twelve months. Facility policy #16-082 ensures that all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation will be protected.
- B.** The PREA Coordinator, in conjunction with the Jail Administrator, will ensure multiple protection measures, including 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.
- C.** The Jail Administrator and designated staff member charged with monitoring confirmed that monitoring of inmates or staff against retaliation for a minimum of 90 days and beyond if it is determined there, is a continuing need.

- D. Facility policy #16-082 and the staff member charged with monitoring confirmed monitoring would include weekly status checks with inmates.
- E. The facility will take appropriate measures to protect an individual who cooperates with an investigation and expresses fear of retaliation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with staff member charged with monitoring
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 prohibits inmates at high risk of sexual victimization from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there are no known alternative means of separation.
- B. The PREA Coordinator verified that inmates placed in segregated housing would have access to programs, privileges, education, and work opportunities, and any restrictions would be documented.
- C. An inmate at high risk of sexual victimization would only be placed in involuntary segregated housing until an alternative means of separation from likely abusers can be arranged. Such an assignment shall not ordinarily exceed thirty days. The PREA Coordinator verified the policy would be followed.

- D. Suppose an inmate is placed in an involuntary segregated housing assignment. In that case, the facility will document the basis for their concerns for their safety and why no alternative means of separation can be arranged.
- E. An inmate's involuntary segregated housing assignment would be reassessed every thirty days.

In the past twelve months, the facility reports there have been zero inmates placed in involuntary protective custody for 1 to 24 hours awaiting completion of an assessment. In the past twelve months, the facility reports zero inmates placed in involuntary segregated housing.

During the onsite audit, there were no inmates at risk of sexual victimization or alleged to have suffered abuse housed in involuntary housing.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Inmate housing assignments

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- 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 No NA

115.71 (b)

- 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 No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No

- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- 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 No

115.71 (e)

- 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 No
- 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 No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- 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 No

115.71 (g)

- 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 No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- 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 No

115.71 (j)

- 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 No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. Facility policy #16-082 states that when the facility conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall promptly initiate a thorough and objective investigation for all allegations, including third-party and anonymous reports.
- B. The facility investigator who conducts administrative investigations has received training according to standard 115.34.
- C. Facility staff would secure the scene until an investigator from the Watford City Police Department or North Dakota Bureau of Criminal Investigations arrives at the scene. The administrative investigator interviewed was able to explain the investigative process and the collection of evidence.
- D. The Watford City Police Department or North Dakota Bureau of Criminal Investigations investigator would conduct and consult with the prosecuting attorney according to their Agency's policy and procedures.
- E. The administrative investigator bases the credibility of the alleged victim, abuser, and witnesses on what the evidence supports as the investigation develops. The facility does not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for investigating such an allegation.
- F. Facility policy #16-082 outlines the requirement of this paragraph when conducting administrative investigations. The facility reported conducting three administrative investigations. The investigation included descriptions of evidence, the basis for the final disposition, and investigative facts and findings.

- G. Facility policy #16-082 requires criminal investigations to be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence. It attaches copies of all documentary evidence where feasible.
- H. The Watford City Police Department or the North Dakota Bureau of Criminal Investigations would be responsible for forwarding their investigation to the prosecuting attorney's office for prosecution.
- I. The facility retains all written reports from administrative and criminal investigations for as long as the alleged abuser is incarcerated or employed by the Agency, plus five years.
- J. The Jail Administrator and PREA Coordinator verified that the departure of the alleged victim or abuser from employment or control of the facility would not provide a basis for terminating an investigation.
- J. The Watford City Police Department and North Dakota Bureau of Criminal Investigations conducts criminal investigations.
- K. The PREA Coordinator would be responsible for providing outside investigators information requested and remaining informed of the progress of the investigation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator) (Administrative Investigator)
- Investigation reports

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility reports it does not impose a standard higher than a preponderance (more than fifty percent) of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with an investigator who conducts administrative investigations
- Investigation reports

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- 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 No

115.73 (b)

- 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.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- 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 No

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?
 Yes No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** Facility policy #16-082 states following an investigation, the PREA investigator or staff member designated by the PREA investigator will inform the inmate or inmates verbally whether the allegation has been substantiated, unsubstantiated, or unfounded. In the past twelve months, two inmates were notified in writing of the final disposition of an investigation.

- B.** The facility will request relevant information from the Watford City Police Department or North Dakota Bureau of Criminal Investigations.

- C.** Facility policy #16-082 outlines the information provided to the inmate on the status of the accused staff member. (As detailed in this standard)

- D.** Facility policy #16-082 outlines the information provided to the inmate on the status of the alleged abuser if another inmate is accused. (As detailed in this standard)

- E.** All notifications or attempted notifications of the final determination will be documented. A copy is given to the inmate; the inmate will sign a copy of the notification and be stored in the medical drive.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with the administrative investigator
- Interview with Jail Administrator Travis Olson
- Notification review

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- 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 No

115.76 (d)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. In the past twelve months, the facility reports zero staff have been terminated or resigned before termination, violating Agency sexual abuse and harassment policies. In the past twelve months, the facility reports that one staff member was disciplined for violating sexual harassment policies.
- B. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
- C. Facility policy #16-082 outlines the progressive discipline of staff members for violations of policies related to sexual abuse or harassment (other than engaging in sexual abuse.)
- D. All terminations or resignations for violating Agency sexual abuse and harassment policies will be reported to law enforcement agencies unless the activity was not criminal and to any relevant licensing bodies.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Investigation records

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. In the past twelve months, the facility reports zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of inmates. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and reported to law enforcement agencies and relevant licensing bodies unless the activity was not criminal.
- B. The facility would take remedial measures such as additional training and consider whether to prohibit further contact with inmates in the case of any other violation of jail sexual abuse or harassment policies. The Jail Administrator would determine on a case-by-case basis whether to prohibit further contact with inmates.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- 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 No

115.78 (b)

- 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 No

115.78 (c)

- 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 No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- 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 No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility has a formalized discipline plan applicable to inmates, as outlined in policy and inmate handbook. The discipline process allows the inmate to appeal the initial decision to someone other than the individual who initially reviewed the grievance.
- B. Disciplinary decisions are based on the nature and circumstances of the abuse committed, the inmate's discipline history, and the sanctions imposed for comparable offenses by other inmates.
- C. The disciplinary process considers whether an inmate's mental disability or illness contributed to the inmate's behavior.
- D. The facility does not offer therapy, counseling, or other interventions to address and correct underlying reasons or motivations for offending inmates. The facility does have a mental health provider to provide mental health services to inmates.
- E. An inmate would not be disciplined for sexual contact with a staff member unless there is a finding that the staff member did not consent to the contact.
- F. The facility does not discipline inmates for reports of sexual abuse made in good faith based on a reasonable belief that the alleged conduct occurred, even if the investigation does not establish evidence sufficient to substantiate the allegation.

- G. The facility prohibits sexual activity between inmates and disciplines inmates for such activity and deems it criminal sexual abuse only if it determines the activity was not coerced.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Facility policy #12-066
- Inmate handbook
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson

MEDICAL AND MENTAL CARE

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
 Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- 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? Yes No

115.81 (d)

- 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 No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- C. The facility reports that inmates who disclose any prior sexual victimization during the risk assessment are referred to medical staff. Staff interviewed confirmed the inmate is offered a follow-up meeting with medical and mental health providers. The inmate is generally seen within 72 hours.
- D. Disclosure of information related to sexual victimization or abuse that occurred in an institutional setting is strictly limited to staff, as necessary, to make security and management decisions, including treatment plans, housing, work, education, and program assignments.
- E. Medical and mental health providers disclose limitations of confidentiality at the initiation of services. The inmate would be asked to sign an informed consent document before the provider would disclose information about prior victimization that did not occur in a confinement facility unless the inmate is considered a vulnerable adult.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with a medical provider
- Interview with staff who perform risk screenings

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- 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 No

115.82 (b)

- 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 No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- 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 No

115.82 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A.** Inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope are determined by the professional judgment of medical and mental health providers. Inmate victims of sexual abuse will be transported to McKenzie County Hospital for medical care.
- B.** Facility policy #16-082 requires staff to take preliminary steps to protect the victim and immediately notify the appropriate medical and behavioral providers.
- C.** Inmates would be offered timely access to emergency contraception and sexually transmitted prophylaxis from the SANE professional or advocate. The facility nurse would follow up with the inmate and consult with the medical provider to develop a treatment plan for ongoing treatment.
- D.** Facility policy #16-082 states that treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082

- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with a medical provider

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- 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 No

115.83 (b)

- 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 No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- 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 No NA

115.83 (e)

- 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 No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- 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 No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility contracts with ANOVA Family Health to provide a medical provider to provide medical services to inmates. The facility employs a registered nurse to work in facility Monday-Friday to provide medical services to inmates. The facility uses Midwest Behavioral Health Services to provide behavioral health services to inmates. As requested by the inmate, the medical and behavioral health providers would offer treatment to an inmate who has been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.
- B. Medical staff interviewed verified follow-up services and treatment plans as appropriate would be provided to the inmate. Referrals for continued care following their transfer to, or placement in, other facilities or their release from custody.
- C. Inmates are provided community level of care. The medical and behavioral health practitioners the facility uses are community providers.
- D. Female inmates would be offered pregnancy tests.
- E. Facility policy #16-082 ensures female victims of sexual abuse would receive information about access to all lawful pregnancy-related medical services.
- F. Inmate victims of sexual abuse would be offered testing, treatment, and information for sexually transmitted infections.
- G. Facility policy #16-082 states that treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation.
- H. This paragraph is not applicable; the facility is a county jail.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with a medical provider

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- 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 No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- 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 No
- 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 No
- 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 No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- 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 No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility reports in the past twelve months, there has been one administrative sexual abuse investigation completed. Facility policy #16-082 states the facility shall conduct a sexual abuse incident review after every sexual abuse investigation, including when the allegation had been determined to be unfounded.
- B. Facility policy #16-082 states the review should ordinarily occur within 30 days of the conclusion of the investigation.
- C. The review team consists of the PREA Coordinator, investigator, and any other designated staff.
- D. The Jail Administrator and PREA Coordinator reported that the team would consider (1-6) this standard in paragraph (d).
- E. The facility reports any recommendations for improvement that would be implemented or documented for not doing so.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with the PREA Coordinator
- Completed incident review

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- 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 No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?
 Yes No

115.87 (c)

- 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 No

115.87 (d)

- 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 No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

A&C. The facility collects data for every allegation of sexual abuse and sexual harassment.

B. The Jail Administrator and PREA Coordinator review the data annually.

D. The facility maintains, reviews, and collects data as needed from all incident-based documents.

E. This paragraph is not applicable; the facility does not contract with private facilities for the confinement of its inmates.

F. This paragraph is not applicable; the Department of Justice has not requested Agency data.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Document review
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator)

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- 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 No
- 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 No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- 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 No

115.88 (c)

- 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 No

115.88 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The facility reviews data collected and uses the data for ongoing improvement and corrective action at its facility.
- B. The facility prepares an annual report that compares the current year's data and the previous year's data to address sexual abuse and harassment.
- C. The facility completes an annual PREA report approved by the Jail Administrator and publishes it on their website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>
- D. An explanation of redacted material will be provided.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Jail Administrator Travis Olson
- Interview with Krista Lickert (PREA Coordinator)
- Facility website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- 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 No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

- A. The data is securely maintained on the administrative drive that only the Jail Administrator and PREA Coordinator has access to.
- B. The Agency's sexual abuse data is publicly distributed on the Agency's website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>.
- C. All personal identifiers are redacted before making the information public.
- D. Policy dictates that sexual abuse data is maintained for a minimum of 10 years after the initial collection date.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy #16-082
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Krista Lickert (PREA Coordinator)
- Facility website: <https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act>

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- 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 No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a “no” response does not impact overall compliance with this standard.*) Yes 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 No NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) Yes No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? Yes No

115.401 (n)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

This is McKenzie County's second PREA audit. On May 7, 2018, the McKenzie County Correctional Facility was in full compliance with the Prison Rape Elimination Act (PREA) Standards. The original jail administrator and quality assurance director/PREA Coordinator retired in 2020. A new jail administrator

and quality assurance director/PREA Coordinator chosen to fill the positions have maintained a high level of professionalism, a culture of zero tolerance for sexual abuse and harassment, and a clean, orderly facility.

I was given full access to the facility and met privately with staff and inmates without interference. PREA audit posters with my name and address in English and Spanish were posted six weeks before the audit and still posted during the onsite audit. I did not receive any correspondence from staff or inmates during the audit process.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- 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 that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The Agency has its 2018 final audit report posted on its website:
<https://county.mckenziecounty.net/Department/Correctional/Prison-Rape-Elimination-Act> The contract agreement requires the facility to post a copy of its final audit report within 90 days.

AUDITOR CERTIFICATION

I certify that:

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

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Darnel Carlson

October 9, 2021

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.