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

	Adult Priso	ons & Jails		
	☐ Interim	⊠ Final		
	Date of Report	t July 1, 2019		
	Auditor In	formation		
Name: Chris Harrifeld		Email: Chris.Harrifeld@Nebraska.gov		
Company Name: The Kieh	l Consulting Group, LLC.			
Mailing Address: 3345 We	est Plum Street	City, State, Zip: Lincoln, N	NE 68522	
Telephone: 402-310-987	6	Date of Facility Visit: May	13-17, 2019	
	Agency In	formation		
Name of Agency:		Governing Authority or Parent Agency (If Applicable):		
Platte County Detention I	acility	Platte County Sheriff's Office		
Physical Address: 1125 Ea	ast 17th Street	City, State, Zip: Columbus, NE 68601		
Mailing Address: Click or ta	p here to enter text.	City, State, Zip: Click or tap here to enter text.		
Telephone: 402-563-4274		Is Agency accredited by any o	rganization? 🛛 Yes 🔲 No	
The Agency Is:	Military	☐ Private for Profit	☐ Private not for Profit	
☐ Municipal	□ County	☐ State	☐ Federal	
Agency mission: Click or ta	o here to enter text.			
Agency Website with PREA Info	ormation: http://www.platt	tecounty.net/detention.htm	า	
	Agency Chief E	xecutive Officer		
Name: Ed Wemhoff		Title: Sheriff		
Email: sheriff@plattene.us		Telephone: 402-564-907	77	
	Agency-Wide PF	REA Coordinator		
Name: Jason Prososki		Title: Staff Sergeant		
Email: detention1c@pla	ttene.us	Telephone: 402-563-427	74	

PREA Coordinator Reports to: Lt. Dave Westfall		Number of Compliance Managers who report to the PREA Coordinator 0			
	Facilit	y Informatio	on		
Name of Facility: Platte (County Detention Fa	acility			
Physical Address: 1125 Ea	ast 17th Street				
Mailing Address (if different than	above): Click or tap	here to enter te	xt.		
Telephone Number: 402-5	63-4274				
The Facility Is:	☐ Military	☐ Private for p	profit	☐ Priva	te not for profit
☐ Municipal	□ County	State		☐ Fed	eral
Facility Type:	⊠ Jai	I		Prison	
Facility Mission: Click or tap h	nere to enter text.		I		
Facility Website with PREA Inform	nation: http://www.	plattecounty.ne	et/detention.ht	m	
	Warder	/Superintende	nt		
Name: Dave Westfall		Title: Lieuter	nant		
Email: corrdirector@plattene.us Telephone: 402-563-4274					
	Facility PRE	Compliance N	lanager		
Name: Jason Prososki		Title: Staff S	itle: Staff Sergeant		
Email: detention1c@platte	ene.us	Telephone: 4	102-563-4274		
Facility Health Service Administrator					
Name: Carolyn Ferguson	Title: Medica	e: Medical Provider			
Email: npcferguson@gmail.com Telephone: 402-860-0186					
Facility Characteristics					
, , ,	Designated Facility Capacity: 144 Current Population of Facility: 105				
Number of inmates admitted to facility during the past 12 months 1303			1303		
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:					
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:					

Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:						
Age Range of Population:						
Are youthful inma	tes housed separately from the adult p	opulatio	on?	☐ Yes	☐ No	⊠ NA
Number of youthf	ul inmates housed at this facility during	the pa	st 12 month	s:		0
Average length of	stay or time under supervision:					20.1 days
Facility security le	evel/inmate custody levels:					Min, Med, Max
Number of staff c	urrently employed by the facility who m	ay have	contact wi	th inmates:		38
Number of staff h	ired by the facility during the past 12 m	onths w	ho may hav	e contact with	inmates:	4
Number of contra inmates:	cts in the past 12 months for services v	vith con	tractors wh	o may have co	ntact with	0
	Pł	nysica	l Plant			
Number of Buildir	_	Numb	er of Single	Cell Housing L	Inits: 4	
Number of Multipl	e Occupancy Cell Housing Units:		1			
Number of Open I	Bay/Dorm Housing Units:		4			
Number of Segregation Cells (Administrative and Disciplinary		inary:	7			
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):						
Facility has a video and audio surveillance system throughout the facility. Cameras are located in all areas occupied by inmates except inside cells. This includes inmate work areas and booking/intake areas. These cameras are monitored from the centrally located control center. This system is equipped with a DVR for storage.						
Medical						
Type of Medical F	acility:		Medical	office with to	wo contract	nurses.
Forensic sexual assault medical exams are conducted at:		:	Columbus Community Hospital			
Other						
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:						
Number of investigators the agency currently employs to investigate allegations of sexual abuse:						

Audit Findings

Audit Narrative

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

Pre-Audit activity began approximately thirty (30) days prior to the on-site audit. Pre-audit activities consisted of reviewing the facility questionnaire with supplied documentation and working with the facility's PREA Coordinator to clarify provided data. The Platte County Detention Facility (PDCF) PREA Audit was conducted May 13-17, 2019. During this time period the average inmate population was 97. There are currently 38 staff members employed by the PCDF. Actions taken during this time period consisted of a facility tour, additional documentation review, witnessing staff procedures, conducting inmate, staff and contractor/volunteer interviews. Since the on-site facility audit additional information has been requested and received from the facility to clarify any outstanding questions. Further review of data gathered during pre-audit, audit and post audit phases has occurred resulting in this Auditor's Summary Report.

In 2016 the Platte County Detention Facility (PCDF) underwent its first PREA audit. After completing a corrective action period, the PCDF achieve full compliance with all PREA Standards. Since that time the Platte County Detention Facility has maintained that level of compliance with standards and has continued to make improvements to its program. For the 2019 audit the Platte County Detention Facility was found to meet or exceed all standards with no corrective action needed.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Platte County Detention Facility (PCDF) is located in Columbus Nebraska. The PCDF consists of one adult detention facility with a designed capacity of 145 inmates. The population is made up of both female and male inmates with the average length of stay being approximately twenty (20) days. The facility houses inmates at custody levels of minimum, medium and maximum security. In addition to county inmates the Platte County Detention Facility contracts with the Nebraska Department of Correctional Services (NDCS) for the detention of inmates in the custody of the State of Nebraska.

The Platte County Detention Facility (PCDF) operates with oversight from the Platte County Sheriff's Office however the two agencies operate independently. Lieutenant Dave Westfall is the Director for the Platte County Detention Facility and oversees the day-to-day operation. Since this agency operates one stand-alone facility Staff Sergeant Jason Prososki operates as both the PREA Coordinator and PREA Manager. Staff Sergeant Jason Prososki reports directly to Director Westfall.

The Platte County Detention Facility (PCDF) has an on-site medical and mental health services contract with Advanced Correctional Health Care. Any emergency medical services or forensic medical exam services will be referred to the Columbus Community Hospital located locally in Columbus Nebraska.

The Platte County Detention Facility (PDCF) does not maintain a designated trained investigator for administrative or criminal investigations. Any incidents of sexual abuse or sexual harassment are referred to two investigators with the Platte County Sheriff's Office. If allegations are made against staff the referral will be made to the Nebraska State Patrol through the Platte County Attorney's Office.

Summary of Audit Findings

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

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

Number of Standards Exceeded: 2

115.34, 115.35

Number of Standards Met: 43

115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 117.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403

Number of Standards Not Met: 0

Click or tap here to enter text.

Summary of Corrective Action (if any)

No corrective action needed.

PREVENTION PLANNING

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

All Yes/N	o Questions Must Be Answered by The Auditor to Complete the Report
115.11 (a	
	bes the agency have a written policy mandating zero tolerance toward all forms of sexual buse and sexual harassment? $\ oxdot$ Yes $\ oxdot$ No
	bes the written policy outline the agency's approach to preventing, detecting, and responding sexual abuse and sexual harassment? $\ oxin{tabular}{ c c c c c c c c c c c c c c c c c c c$
115.11 (b	
■ Ha	as the agency employed or designated an agency-wide PREA Coordinator? $oxdot$ Yes $oxdot$ No
• Is	the PREA Coordinator position in the upper-level of the agency hierarchy? $\ oxtimes$ Yes $\ oxtimes$ No
ov	bes the PREA Coordinator have sufficient time and authority to develop, implement, and ersee agency efforts to comply with the PREA standards in all of its facilities? Yes $\ \square$ No
115.11 (c	
	this agency operates more than one facility, has each facility designated a PREA compliance anager? (N/A if agency operates only one facility.) \square Yes \square No \boxtimes NA
fac	bes the PREA compliance manager have sufficient time and authority to coordinate the cility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) Yes \square No \boxtimes NA
Auditor C	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)

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

The Platte County Detention Facility (PCDF) has a standalone PREA policy. The PCDF policy section #6-3 declares a zero tolerance policy towards all forms of sexual abuse and harassment. The policy also outlines the PCDF approach at combating sexual harassment and abuse. Policy section #6-11 addresses the disciplinary process for staff, volunteers/contractors and inmates.

The facility's Staff Sergeant (SSGT) has been appointed as the PCDF PREA Coordinator. The SSGT. overseas all aspects and efforts to comply with PREA Standards. His duties and responsibilities are also laid out in policy section #7-3. Through interviews as well as documentation review it was evident that the SSGT. has both sufficient time and authority to develop, implement and oversea PREA compliance efforts. The PREA Coordinator reports to facility director.

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

•	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 or
	or after August 20, 2012? (N/A if the agency does not contract with private agencies or other
	entities for the confinement of inmates.) \square Yes \square No \boxtimes 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 OR the response to 115.12(a)-1 is "NO".) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	for Overall Compliance Determination Narrative
complia conclu- not me	ance or sions. The et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
The Platte County Detention Facility (PCDF) does not contract with private agencies or other entities for the confinement of Platte County inmates. In the event the facility would ever need to house inmates elsewhere the PCDF does have in place section #7-3 (C) stating that the Platte County Detention Facility will ensure any other agency they may choose to confine inmates at will have PREA policy in place and that the other agency complies with these standards.		
Stan	dard 1	I15.13: Supervision and monitoring
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.13	s (a)	
•	adequa	he agency ensure that each facility has developed a staffing plan that provides for ate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse? \boxtimes Yes \square No
•	adequa	he agency ensure that each facility has documented a staffing plan that provides for ate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse? \boxtimes Yes \square No
•	accept	he agency ensure that each facility's staffing plan takes into consideration the generally ed detention and correctional practices in calculating adequate staffing levels and lining the need for video monitoring? \boxtimes Yes \square No
•	finding	he agency ensure that each facility's staffing plan takes into consideration any judicial s of inadequacy in calculating adequate staffing levels and determining the need for video ring? $\ oxdot$ Yes $\ oxdot$ No

•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No \square NA
•	Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
115.13	3 (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.) \square Yes \square No \boxtimes NA
115.13	B (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? \boxtimes Yes \square No

•	assess	past 12 months, has the facility, in consultation with the agency PREA Coordinator, led, determined, and documented whether adjustments are needed to: The facility's ment of video monitoring systems and other monitoring technologies? Yes No
•	assess	past 12 months, has the facility, in consultation with the agency PREA Coordinator, ed, determined, and documented whether adjustments are needed to: The resources the has available to commit to ensure adherence to the staffing plan? \boxtimes Yes \square No
115.13	(d)	
•	level su	e facility/agency implemented a policy and practice of having intermediate-level or higher-upervisors conduct and document unannounced rounds to identify and deter staff sexual and sexual harassment? \boxtimes Yes \square No
•	Is this	policy and practice implemented for night shifts as well as day shifts? $oxtimes$ Yes \odots No
•	these s	he facility/agency have a policy prohibiting staff from alerting other staff members that supervisory rounds are occurring, unless such announcement is related to the legitimate onal functions of the facility? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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The Platte County Detention Facility (PCDF) staffing plan is designed around a minimum number of eight (8) staff per shift. Both female and male staff members are figured into this staffing plan which is also required by state standards. If needed the PCDF will utilize overtime or hold staff over to maintain that minimum level.

No deviation from the staffing plan has occurred that would require documentation. The facility uses overtime and the practice of holding staff over to maintain minimum staffing. The facility does complete an annual review. The next annual review will be conducted using the revised staffing plan.

Policy Section #7-4 addresses Sergeants conducting and documenting unannounced rounds to identify and deter staff sexual abuse and harassment. This policy and practice covers both shifts. Documentation, interviews and video surveillance review support this policy and practice. Policy #7-4 also prohibits staff from alerting other staff members that these rounds are occurring.

Standard 115.14: Youthful inmates

All Yes/	No Questions Must Be Answered by the Auditor to Complete the Report
115.14 (a)
s	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 nmates [inmates <18 years old].) \square Yes \square No \boxtimes NA
115.14 (b)
у	n areas outside of housing units does the agency maintain sight and sound separation between routhful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 rears old].) \square Yes \square No \boxtimes NA
ir	n areas outside of housing units does the agency provide direct staff supervision when youthful nmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have routhful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA
115.14 (c)
V	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].) \square Yes \square No \boxtimes NA
e	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 facility does not have youthful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA
p	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].) \square Yes \square No \boxtimes 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)	
Instru	ctions f	or Overall Compliance Determination Narrative	
complia conclu- not me	ance or sions. The et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does randard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.	
needed	l the Nor	at no juvenile will be held in the Platte County Detention Facility. If juvenile secure housing is theast Nebraska Juvenile Services facility in Madison Nebraska will be utilized. This was terviews and provided documentation showing juveniles are housed elsewhere.	
Stan	dard 1	15.15: Limits to cross-gender viewing and searches	
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report	
115.15	i (a)		
•	body c	he facility always refrain from conducting any cross-gender strip or cross-gender visual avity searches, except in exigent circumstances or by medical practitioners?	
115.15	(b)		
•	inmate	he facility always refrain from conducting cross-gender pat-down searches of female s in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before 20,2017.) \boxtimes Yes \square No \square NA	
•	prograi	he facility always refrain from restricting female inmates' access to regularly available mming or other out-of-cell opportunities in order to comply with this provision? (N/A here lities with less than 50 inmates before August 20, 2017.) \boxtimes Yes \square No \square 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? ☑ Yes □ No
115.15 (d)
■ Does the facility implement a policy and practice 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?
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)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Platte County Detention Facility (PCDF) policy section #3-4 (H-1) states that cross-gender searches of any kind are not permitted. Cross-gender pat searches are allowed under emergency circumstances. Any cross-gender pat search conducted under emergency circumstances will be documented. No instances have occurred do to policy and female staffing numbers.

According to both staff and inmate interviews as well as staff roster reviews female inmates are in no way restricted from programming or out-of-cell opportunities because of the PCDF ability to search female inmates.

The Platte County Detention Facility(PCDF) has policy section #6-4 (F) in place enabling inmates to shower, perform bodily functions and change clothing without staff of the opposite gender viewing them. The facility's design also lends to this practice. Policy section #6-4 (F) also calls for staff of the opposite gender to announce their presence when entering a housing unit. This standard was overwhelmingly supported by both staff and inmate interviews.

PCDF policy section #6-7 (C-6) fully supports standards in regard to the facility not searching or physically examining a transgender or intersex inmate for the sole purpose of determining an inmate's genital status. If unknown it may be determined through conversation, by reviewing medical records or if necessary as part of a broader medical exam by medical staff.

All security staff has received training within the last year on how to conduct cross-gender pat searches and searches of transgender and intersex inmates. The training curriculum was provided by the PREA Resource Center. Training was supported by staff interviews and training documentation.

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

11	5.	16	(a)
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•	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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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)? \boxtimes Yes \square No
•	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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 of 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

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The Platte County Detention Facility (PCDF) has taken appropriate steps to ensure inmates with disabilities and limited English proficiency have an equal opportunity to participate in facility's efforts to combat sexual assault and harassment. The Platte County Detention Facility (PCDF) has trained staff on these appropriate steps. The PCDF further supports this standard with policy section #6-7 along with written materials in alternate languages which they are continuing to expand on.

The Platte County Detention Facility (PCDF) has a current contract with Affordable Language Services for interpreting services. In addition, the facility has an MOU with the Columbus Community Hospital for interpretation services for those inmates that are deaf and blind. A copy of both this contract and MOU were provided during the audit.

The Platte County Detention Facility (PCDF) has policy #6-7 (E) which prohibits the use of inmate interpreters, inmate readers and other types of inmate assistance with PREA related incidents unless under emergency type situations. Interviews, documentation, policy, agency contracts and MOU's with interpreter services support this standard.

Standard 115.17: Hiring and promotion decisions

11	5.1	7 ((a)
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•	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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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, or 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 employer 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 check 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 writter 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? 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.) \boxtimes Yes \square No \square NA
Audito	or 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

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Policy section #6-4 (J-1) address that the PCDF will not hire, promote anyone or retain the 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.
- Has been convicted of, or civilly or administratively adjudicated for, engaging or attempting to engage in sexual activity in the community facilitated by force, threats of force, or coercion, or if the victim did not consent or was unable to consent.

Furthermore, facility policy section #6-4 (J-2) supports standards whereas the PCDF considers any incident of sexual harassment in determining whether to hire or promote anyone, or retain the services of any contractor who may have contact with inmates.

The Platte County Detention Facility (PCDF) according to policy section #6-4 (J-3) will make its best efforts to contact prior institutional employers for information on substantiated allegations of sexual abuse or resignations during a pending investigation of such. Documentation supports that the PCDF performs criminal background checks on all contractors who may have contact with inmates before enlisting their services.

According to policy the Platte County Detention Facility (PCDF) shall conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates. These background checks will be conducted by the PREA Coordinator at least 30 days prior to the 5-year anniversary. Documentation of such background checks was supplied during the on-site audit.

Policy #6-4 (J-6) supports that written applications and /or interviews for hiring or promotions are asked about previous misconduct covered in this standard as well as during interviews or written self-evaluations conducted as part of reviews with current employees. These application/interview questions were provided during the onsite audit. Policy #6-4 (J-7) supports that the agency imposes on its current employees a continuing affirmative duty to disclose any misconduct related to this standard.

Policy #6-4 (J-8) addresses that material omission regarding such misconduct or the provision of materially false information shall be grounds for termination.

According to policy #6-4 (J-9) unless prohibited by law, the PCDF shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

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 agen	sion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A cy/facility has not acquired a new facility or made a substantial expansion to existing s since August 20, 2012, or since the last PREA audit, whichever is later.) □ No □ NA
115.18	(b)	
•	other magency update techno	gency installed or updated a video monitoring system, electronic surveillance system, or nonitoring technology, did the agency consider how such technology may enhance the r' s ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or d a video monitoring system, electronic surveillance system, or other monitoring logy since August 20, 2012, or since the last PREA audit, whichever is later.) \square No \square NA
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

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.

Does Not Meet Standard (Requires Corrective Action)

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

The agency has not designed, acquired any new facility or modified its existing facility since August 20, 2012 therefore this standard is non-applicable. In addition, the facility has not upgraded or enhanced its video monitoring or electronic surveillance systems since the last PREA audit.

The facility does plan to enhance its existing video system in the near future as a proactive PREA initiated move. These additions are planned for areas that do not currently have video surveillance.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 ((a)
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•	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.) \square Yes \square No \boxtimes NA
115.21	l (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 evidentiary or medically appropriate? \boxtimes Yes \square No
•	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? \boxtimes Yes \square 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)? \boxtimes Yes \square No
•	Has the agency documented its efforts to provide SAFEs or SANEs? $oximes$ Yes \odots No
115.21	(d)
•	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? \boxtimes Yes $\ \square$ 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? \boxtimes Yes \square No
•	Has the agency documented its efforts to secure services from rape crisis centers? $\ \ \boxtimes Yes \ \ \Box No$
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? \boxtimes Yes \square No
•	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? \boxtimes Yes $\ \square$ No
115.21	(f)
-	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) \boxtimes Yes \square No \square 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] \square Yes \square No \boxtimes NA
Audito	or Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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Policy #6-10 states that Platte County Sheriff's Office will conduct all investigations into alleged sexual abuse and sexual harassment so standards 115.21 sections (a) and (b) are not applicable. If the allegations involve sexual abuse by Platte County Detention Facility (PCDF) staff the reports shall be forwarded to the Platte County Attorney's office. The Platte County Attorney's office may then forward those reports to the Attorney General's office to then be assigned to the Nebraska state patrol for investigation.

PCDF policy supports that all victims of sexual abuse will be offered access to forensic medical examinations without financial cost to the victim. These examinations will be performed by SAFE or SANE certified staff at the Columbus Community Hospital. This standard is also supported by PREA Coordinator and medical staff interviews.

A victim advocate will be made available according to PCDF policy to accompany the victim through the forensic medical exam process. The department has an existing Memorandum of Agreement (MOA) with the Victims Assistance Office of Platte and Colfax Counties. Policy, interviews and supporting documentation in the form of the MOA support this standard.

Platte County Sheriff's Office investigators receive specialized investigator training pursuant to section (f) of this standard.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.22	? (a)	
•		he agency ensure an administrative or criminal investigation is completed for all tions of sexual abuse? $oxtimes$ Yes \oxtimes No
•		the agency ensure an administrative or criminal investigation is completed for all tions of sexual harassment? $oxtimes$ Yes \oxtimes No
115.22	2 (b)	
•	or sex	the agency have a policy and practice in place to ensure that allegations of sexual abuse ual harassment are referred for investigation to an agency with the legal authority to ct criminal investigations, unless the allegation does not involve potentially criminal for? \boxtimes Yes \square No
•		e agency published such policy on its website or, if it does not have one, made the policy ole through other means? \boxtimes Yes \square No
•	Does t	he agency document all such referrals? $oxtimes$ Yes \oxtimes No
115.22	2 (c)	
•	descri	parate entity is responsible for conducting criminal investigations, does such publication be the responsibilities of both the agency and the investigating entity? [N/A if the y/facility is responsible for criminal investigations. See 115.21(a).] \boxtimes Yes \square No \square NA
115.22	2 (d)	
•	Audito	r is not required to audit this provision.
115.2	2 (e)	
•	Audito	r is not required to audit this provision.
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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Platte County Detention Facility (PCDF) policy #6-10 clearly states who is responsible for both administrative and criminal investigations. Investigators from the Platte County Sheriff's Department will assume all investigation responsibilities that involve sexual assault and harassment. If facility staff members are alleged, then the investigation will be forwarded to the Nebraska State Attorney General's Office for assignment to the Nebraska State Patrol. This is published to the Platte county Detention Facility's website.

TRAINING AND EDUCATION

Standard 115.31: Employee training

1 1 J.J 1 (a <i>1</i>	11	5	.31	(a)	١
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•	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? \boxtimes Yes \square 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? \boxtimes Yes \square 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 \boxtimes Yes \square 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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? \boxtimes Yes \square No
-	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? \boxtimes Yes \square 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? \boxtimes Yes \square No

•		he agency train all employees who may have contact with inmates on how to avoid opriate relationships with inmates? $oxtime oxtime {\sf Yes} \Box$ No
•	comm	the agency train all employees who may have contact with inmates on how to unicate effectively and professionally with inmates, including lesbian, gay, bisexual, ender, intersex, or gender nonconforming inmates? \boxtimes Yes \square No
•	releva	the agency train all employees who may have contact with inmates on how to comply with nt laws related to mandatory reporting of sexual abuse to outside authorities? \Box No
115.31	(b)	
•	Is such	n training tailored to the gender of the inmates at the employee's facility? $oxtimes$ Yes $oxtimes$ No
•		employees received additional training if reassigned from a facility that houses only male as to a facility that houses only female inmates, or vice versa? \boxtimes Yes \square No
115.31	(c)	
•		all current employees who may have contact with inmates received such training? \Box No
•	all emp	he agency provide each employee with refresher training every two years to ensure that ployees know the agency's current sexual abuse and sexual harassment policies and dures? \boxtimes Yes \square No
•	-	rs in which an employee does not receive refresher training, does the agency provide ner information on current sexual abuse and sexual harassment policies? \boxtimes Yes \square No
115.31	(d)	
•		he agency document, through employee signature or electronic verification, that yees understand the training they have received? $oximes$ Yes \oximes No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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Policy #6-8, interviews, NIC developed training curriculum, Power Point, refresher training and additional documentation supports all employees that may have contact with inmates are trained in accordance with standards. This facility is made up of both male and female inmates. Staff are expected to work with and interact with both groups. Such training is tailored to the gender of inmates housed at this facility.

According to policy #6-8 (A 1-10) the PCDF trains all employees on how to fulfill their responsibilities under its sexual abuse prevention, detection, and response policies and procedures. All current staff members have received this training. Policy #6-8 (A-11) states that any newly hired staff will be trained within one year of their employment. In addition, this policy also calls for all staff to receive refresher training every two (2) years. The PCDF also has staff read and sign off on the Platte County Detention Facility's PREA Policy yearly in addition to regular refresher handout information sheets.

The PCDF maintains written documentation showing employee signatures verifying participation and understand of the training they have received.

Standard 115.32: Volunteer and contractor training

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

1	1	5	.3	2	(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) \boxtimes Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) **Does Not Meet Standard** (Requires Corrective Action) **Instructions for Overall Compliance Determination Narrative** The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility. Platte County Detention Facility (PCDF) policy #6-8 (B), provided documentation and interviews supporting that: Contractors and volunteers are trained on their responsibilities under PCDF policy and procedure. All contractors and volunteers are notified of PDCF zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The PCDF maintains documentation confirming that contractors and volunteers understand the training they have received. The PREA Coordinator maintains all documentation of volunteer and contractor training. These signed contractor/volunteer training acknowledgment forms as well as volunteer interviews support compliance with this standard. 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	
pe	Tithin 30 days of intake, does the agency provide comprehensive education to inmates either in erson or through video regarding: Their rights to be free from sexual abuse and sexual arassment? \boxtimes Yes \square No
pe	lithin 30 days of intake, does the agency provide comprehensive education to inmates either in erson or through video regarding: Their rights to be free from retaliation for reporting such cidents? \boxtimes Yes \square No
pe	ithin 30 days of intake, does the agency provide comprehensive education to inmates either in erson or through video regarding: Agency policies and procedures for responding to such cidents? \boxtimes Yes \square No
115.33 (c	
■ Ha	ave all inmates received such education? ⊠ Yes □ No
an	o 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 \Box No
115.33 (d	
	bes the agency provide inmate education in formats accessible to all inmates including those no are limited English proficient? \boxtimes Yes \square No
	bes the agency provide inmate education in formats accessible to all inmates including those ho are deaf? \boxtimes Yes $\ \square$ No
	bes the agency provide inmate education in formats accessible to all inmates including those no are visually impaired? \boxtimes Yes \square No
	bes the agency provide inmate education in formats accessible to all inmates including those no are otherwise disabled? \boxtimes Yes \square No
	bes the agency provide inmate education in formats accessible to all inmates including those no have limited reading skills? \boxtimes Yes \square No
115.33 (e	o)
	bes the agency maintain documentation of inmate participation in these education sessions? Yes $\ \square$ No

115.33 (f)

•	contin	lition to providing such education, does the agency ensure that key information is uously and readily available or visible to inmates through posters, inmate handbooks, or written formats? \boxtimes Yes \square No
Audit	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Platte County Detention Facility (PCDF) policy #6-8 (C-1) along with interviews and observed practices support that inmates receive training initially at intake/booking through general information, written materials and staff answer any questions arrestees might have. Later within 30 days the PREA Coordinator meets with inmates and performs a more comprehensive training.

At the time of the on-site audit all inmates had received initial training and no inmate had gone over the 30-day timeline for more comprehensive training. All inmates that transfer to this facility receive initial training upon intake as any fresh arrest. This education acknowledged and signed by the inmates. It is also maintained by the PREA Coordinator. This standard is supported by policy #6-8 (C-3) as well as formal staff interviews and informal interviews with inmates who had transferred in from other facilities.

According to policy #6-8 (C-4) the Platte County Detention Facility (PCDF) provides inmate education in formats accessible to all inmates, including those who are LEP, deaf, visually impaired, or otherwise disabled as well as inmates who have limited reading skills. The PCDF has a contract with Affordable Language Services for interpretation services and an MOU with the Columbus Community Hospital for blind and deaf assistance services.

The (PCDF) ensures key information is continuously available by providing inmate handbooks as well as printed materials at booking. In addition, each living unit has a PREA television monitor that runs PREA information in a loop and the inmate phone system also has an automatic PREA prompt announcement before an inmate makes a telephone call.

Standard 115.34: Specialized training: Investigations

115.34	(a)
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•	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 have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \square Yes \square No \boxtimes 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).] \square Yes \square No \boxtimes 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).] \square Yes \square No \boxtimes 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).] \square Yes \square No \boxtimes 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).] \square Yes \square No \boxtimes 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).] \square Yes \square No \boxtimes NA
115.34	(d)
	Auditor is not required to audit this provision.

Auditor Overall Compliance Determination \times **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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility. The PREA Manager will begin an initial investigation. If that investigation yields anything of a sexual nature referral will be made to trained investigators with an outside law enforcement agency. Platte County Detention Facility (PCDF) policy #6-10 states that investigators from the Platte County Sheriff's Office will assume all investigation responsibilities that involve sexual assault and sexual harassment. In addition, the Platte County Sheriff's Office investigators receive specialized investigator training in regards to PREA standards requirements. If the allegations involve sexual abuse by Platte County Detention Facility (PCDF) staff the reports shall be forwarded to the Platte County Attorney's office. The Platte County Attorney's office may then forward those reports to the Attorney General's office to then be assigned to the Nebraska State Patrol for investigation. In the event that staff within the facility receive training enabling them to perform administrative investigations such policy also exists. This standard was supported by formal and informal interviews as well as documentation. The Platte County Detention Facility (PCDF) exceeds standards in this area by placing these matters in impartial investigators hands while at the same time insuring that those Sheriff's investigators receive PREA level training in sexual harassment and sexual abuse. 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

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

abuse and sexual harassment? ⊠ Yes □ No

sexual abuse? ⊠ Yes □ No

•	who we	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to respond effectively and sionally to victims of sexual abuse and sexual harassment? Yes No
•	who we	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how and to whom to report allegations or ions of sexual abuse and sexual harassment? \boxtimes Yes \square No
115.35	(b)	
•	receive	ical staff employed by the agency conduct forensic examinations, do such medical staff e appropriate training to conduct such examinations? (N/A if agency medical staff at the do not conduct forensic exams.) \square Yes \square No \boxtimes NA
115.35	(c)	
•	receive	he agency maintain documentation that medical and mental health practitioners have ed the training referenced in this standard either from the agency or elsewhere? \Box No
115.35	(d)	
•		dical and mental health care practitioners employed by the agency also receive training sted for employees by §115.31? \boxtimes Yes \square No
•		dical and mental health care practitioners contracted by and volunteering for the agency ceive training mandated for contractors and volunteers by §115.32? ⊠ Yes □ No
Auditor Overall Compliance Determination		
	\boxtimes	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)

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The Platte County Detention Facility (PCDF) ensures through policy #6-8 (D) that medical and mental health staff has been trained in:

- How to detect and assess signs of sexual abuse
- How to preserve physical evidence of sexual abuse
- How to respond effectively and professionally to victims of sexual abuse
- How and to whom to report allegations or suspicions of sexual abuse

This is accomplished by medical and mental health staff completing the same training as fulltime line staff. This was supported by interviews and training logs.

In addition, contract medical staff receives additional PREA training through Advance Correctional Health Care. The Platte County Detention Facility (PCDF) maintains documentation that medical and mental health practitioners have received this specialized training.

Contract medical staff at this facility does not perform forensic medical examinations. The agency instead relies on the local Columbus Community Hospital for forensic medical exam services.

The Platte County Detention Facility exceeds standard 115.35 by the amount and degree of training that the medical and mental health staff receive.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

11	5	.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? \boxtimes Yes \square 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? \boxtimes Yes \square No

115.41	(b)
•	Do intake screenings ordinarily take place within 72 hours of arrival at the facility? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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)? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No
115.41	(e)
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? \boxtimes Yes \square 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? \boxtimes Yes \square No
115.41	(g)
•	Does the facility reassess an inmate's risk level when warranted due to a: Referral? \boxtimes Yes $\ \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to a: Request? \boxtimes Yes $\ \Box$ No
•	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? \boxtimes Yes $\ \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? \boxtimes Yes \square 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? \boxtimes Yes \square 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)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

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All inmates are assessed during an intake screening. Intake screenings usually takes place immediately during the booking process. This is well within the required 72-hour time frame. This standard is supported by policy #6-7 (A-1) and overwhelmingly supported by inmate interviews. Staff interviews as well as the provided screening tool also support this standard.

The Platte County Detention Facility (PCDF) completes such assessments using an objective screening instrument. Examples of the screening instrument was provided prior to and during the on-site audit. This screening instrument considers at a minimum all the criteria required by standard 115.41 c-e.

PCDF policy #6-7 (A-1d), facility practice and provided complete screening instrument along with staff interviews support this standard.

All inmates at PCDF receive classification reviews within 30 days. Policy #6-7 (A-1f) states that an inmate's risk level will be reassessed when warranted due to referrals, requests, incidents of sexual abuse and any receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

PCDF policy #6-7 (A-1g) does not allow for an inmate to be disciplined for refusing to answer or for not disclosing complete information in response to screening questions asked pursuant to paragraphs (d) 1, (d) 7, (d) 8 or (d) 9 of standard 115.41. This was also supported by interviews.

Platte County Detention Facility (PCDF) policy as well as interviews support that appropriate controls are in place to control the dissemination of sensitive information received during the screening process. According to staff responsible for screenings once they are complete and initial classifications are performed they are turned over to the PREA Coordinator. Once that is done staff no longer have access to them.

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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No
115.42	? (b)
•	Does the agency make individualized determinations about how to ensure the safety of each inmate? \boxtimes Yes $\ \square$ 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

standard)? ⊠ Yes □ No

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

•	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? \boxtimes Yes \square No
115.42	2 (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? \boxtimes Yes \square No
115.42	2 (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? \boxtimes Yes \square No
115.42	2 (f)
•	Are transgender and intersex inmates given the opportunity to shower separately from other inmates? \boxtimes Yes $\ \square$ No
115.42	2 (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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

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

Auditor Overall Compliance Determination

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According to policy #6-7 (C) the Platte County Detention Facility (PCDF) uses information from the risk screening to make housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. This was supported by interviews and provided documentation.

PCDF, specifically the Shift Supervisors make individualized determinations about how to ensure the safety of each inmate.

Transgender and intersex inmate's initial classification is taken on a case-by-case basis by the booking officer to insure the inmate's health and safety.

According to policy #6-7 (C-3a) and interviews placement and programing assignments for each transgender and intersex inmate will be reassessed every forty-five (45) days. This is well within the twice yearly required by standards. No documentation of reassessment exists because a reassessment has not been needed. Policy #6-7 (C-3b) and interviews support that transgender and intersex inmates own views with respect to safety shall be given serious consideration. Policy #6-7 (C-4), interviews and facility design support that transgender and intersex inmates will be given the opportunity to shower separately from other inmates.

Platte County Detention Facility (PCDF) policy #6-7 (C-5) states that lesbian, gay, bisexual, transgender, or intersex inmates are not placed in particular facilities, units, or wings solely on the basis of such identification or status unless pursuant to a legal settlement or judgement. This is supported by interviews with self-identifying inmates and the PREA Coordinator.

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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No
•	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? \boxtimes Yes \square No
•	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? \boxtimes Yes \square No
•	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? \boxtimes Yes \square No
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?

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

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 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

Instructions for Overall Compliance Determination Narrative

standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

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Meets Standard (Substantial compliance; complies in all material ways with the

According to policy #6-4 (I) inmates at high risk for sexual victimization may be placed in segregated housing only as a last resort and then only until an alternative means of separation from likely abusers can be arranged. If the facility cannot conduct an assessment immediately they may hold the inmate in involuntary segregation for under twenty-four (24) hours while completing an assessment.

Inmates placed in segregated housing for this purpose according to policy #6-4 (I-c) shall have access to programs, privileges, education, and work opportunities to the extent possible. If the PCDF restricts access to programs, privileges, education, or work opportunities, the PCDF shall document the opportunities that have been limited, duration of the limitation, and the reasons for such limitations. Policy and interviews support this however no instances have occurred within the past 12 months for additional in-depth review.

 \boxtimes

Policy #6-4 (I-d) and interviews support that the PCDF will only assign inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. According to policy this should not ordinarily exceed 30 days. Alternative means may include transfer to another facility for the inmate's safety.

PCDF policy #6-4 (I-e) addresses that if an involuntary segregated housing assignment is made pursuant to standard 115.43(a) the facility shall clearly document the basis for the facility's concern for the inmate's safety and the reason why no alternative means of separation can be arranged. There have been no incidents of this type in the last 12 months so other types of supporting documentation do not exist.

If an inmate is placed in segregated housing policy #6-4 (I-f) states that every 30 days, the facility will afford each inmate a review to determine wither there is a continuing need for separation from the general population.

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? ⋈ Yes □ No

1 10.01	(6)	
•		staff accept reports of sexual abuse and sexual harassment made verbally, in writing, mously, and from third parties? \boxtimes Yes \square No
•		taff promptly document any verbal reports of sexual abuse and sexual harassment? $\hfill \square$ No
115.51	(d)	
	(/	
•		he agency provide a method for staff to privately report sexual abuse and sexual ment of inmates? $oxtimes$ Yes \oxtimes No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
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The Platte County Detention Facility (PCDF) provides multiple internal ways for inmates to report easily, privately, and securely incidents of sexual abuse, retaliation by other inmates or staff for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. These reporting options include but are not limited to reporting directly to staff, utilizing the housing unit phone system that has a PREA prompt built in. This prompt will automatically contact the PREA coordinator and outside local Platte County Victims Assistance Office as well as a national hotline number. Other options for reporting include contacting the Sheriff's Office directly and writing an inmate request form or filling one out on the inmate kiosk. These reporting options are supported by policy, documentation and interviews by staff as well as inmates.

Policy #6-5 (A-1) states that the facility provides at least one way for inmates to report the abuse to an outside public or private entity or office not part of Platte County and that is able to receive reports and forward reports to agency officials, allowing the inmate to remain anonymous upon request. This may be done via the phone system and with written correspondence.

115 51 (c)

In addition, the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. The PCDF provides such access by giving inmates the telephone numbers, including toll-free hotline numbers, of local, State, and national victim advocacy or rape crisis organizations and enabling reasonable communication between inmates and these organizations. The facility has an existing MOU with the Platte County Victims Assistance Office.

Policy #6-5 (A-1) also states that inmates detained solely for civil immigration purposes may contact officials at the Department of Homeland Security – Community and Detainee Hotline. The number is provided to these individuals in the written materials provided and on the PREA televisions located on the living units. Documentation was provided however, no inmates detained solely for civil immigration purposes were available for interview.

Policy #6-5 (A-1a) states that staff accepts reports made verbally, in writing, anonymously, and from third parties and immediately documents in writing any verbal reports. Staff are required to do so no later than the end of their shift. This standard is supported by policy and staff as well as inmate interviews. Reporting to staff members is also addressed in the printed inmate PREA orientation materials as well as on the PREA televisions located on the housing units.

During interviews staff demonstrated that they had the ability and felt comfortable privately reporting sexual abuse and harassment of inmates. This is further supported by policy #6-5 (A-2c) that states the facility will allow staff to privately report sexual abuse and sexual harassment of inmates. This may be done by breaking the chain of command and reporting directly to the Jail Administrator or PREA Coordinator. Staff during interviews also stated that the Jail Administrator and PREA Coordinator encouraged an open door policy.

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 ⋈ NA

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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA
115.52	2 (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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA
115.52	2 (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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA

115.52 (f)
■ Has the agency established procedures for the filing of an emergency grievance alleging that ar 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.)
 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

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	Does Not Meet Standard (Requires Corrective Action)

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The Platte County Detention Facility (PCDF) has an administrative procedure in place to address inmate emergency grievances regarding sexual abuse. PCDF per policy #6-5 (A-1) states there will be no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. PCDF furthermore does not require the inmate to use any informal grievance process or otherwise attempt to resolve with staff an alleged incident of sexual abuse.

Policy also addresses 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. Also these types of grievances are not referred to a staff member who is the subject of the complaint.

Policy #6-5 (A-2) states that the following procedure will take place with emergency grievances concerning sexual abuse:

- The PCDF issues 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.
- The PCDF may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The PCDF shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.
- 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, the inmate may consider the absence of a response to be a denial at that level.

This standard is supported by the documentation of one grievance and existing policy. The grievance process was observed within the time frame prescribed. The inmate who reported the incident via the grievance process was no longer at facility and unavailable for interview.

PCDF policy #6-5 (A-2) also addresses that the agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the PCDF demonstrates that the inmate filed the grievance in bad faith.

PCDF policy #6-5 (A-3) also addresses rules for third party reporting. The PCDF policy on third party reporting is as follows:

- Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be 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.
- If the inmate declines to have the request processed on his or her behalf, Platte County Detention Facility shall document the inmate's decision.

No documented examples of third party reporting were available for review. No third party reports have been made in the past 12 months.

Policy #6-4 (H) covers Emergency Grievances Alleging Substantial Risk of Imminent Sexual Abuse. This policy supports all aspects of this standard. No incidents of this type have occurred within the last 12 months.

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	a)
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•	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? \boxtimes Yes \square 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? \boxtimes Yes \square No
•	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? \boxtimes Yes \square No
115.53	s (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)

•	agreen	he agency maintain or attempt to enter into memoranda of understanding or other nents with community service providers that are able to provide inmates with confidential nal support services related to sexual abuse? \boxtimes Yes \square No
•		he agency maintain copies of agreements or documentation showing attempts to enter ch agreements? \boxtimes Yes $\ \square$ No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Does Not Meet Standard (Requires Corrective Action)

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

Policy #6-4 (D-1), #6-4 (D-2b) and interviews support that the PCDF:

- Provides 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 and for persons detained solely for civil immigration purposes, Department of Homeland Security - Community and Detainee Hotline. The PCDF shall enable reasonable communication between inmates and these organizations and agencies in as confidential a manner as possible.
- PCDF informs 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.

Policy supports this standard as well as an existing MOU between the Victims Assistance Office and a contract with Advance Correctional Health Care for a licensed mental health practitioner for confidential emotional support services related to sexual abuse. This standard is further supported by documentation provided to the inmates during the intake process and on the PREA monitors located in the living units.

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

Instructions for Overall Compliance Determination Narrative

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The Platte County Detention Facility has established a method to receive third party reports through it's website. The website provides contact information and avenues to report such incidents. This website and method have been verified.

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?

•	knowle	he agency require all staff to report immediately and according to agency policy any edge, suspicion, or information regarding retaliation against inmates or staff who reported dent of sexual abuse or sexual harassment? \boxtimes Yes \square No
•	knowle that ma	he agency require all staff to report immediately and according to agency policy any edge, suspicion, or information regarding any staff neglect or violation of responsibilities ay have contributed to an incident of sexual abuse or sexual harassment or retaliation? \Box No
115.61	(b)	
•	reveali necess	from reporting to designated supervisors or officials, does staff always refrain from ing any information related to a sexual abuse report to anyone other than to the extent sary, as specified in agency policy, to make treatment, investigation, and other security anagement decisions? Yes No
115.61	(c)	
•	practiti	s otherwise precluded by Federal, State, or local law, are medical and mental health oners required to report sexual abuse pursuant to paragraph (a) of this section? \Box No
•		edical and mental health practitioners required to inform inmates of the practitioner's duty ort, and the limitations of confidentiality, at the initiation of services? \boxtimes Yes \square No
115.61	(d)	
•	local v	alleged victim is under the age of 18 or considered a vulnerable adult under a State or ulnerable persons statute, does the agency report the allegation to the designated State all services agency under applicable mandatory reporting laws? Yes No
115.61	(e)	
•		he facility report all allegations of sexual abuse and sexual harassment, including third- and anonymous reports, to the facility's designated investigators? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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

PCDF policy #6-4 calls for any staff member who has any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment or any retaliation against inmates or staff stemming from this type of incident to report such information immediately. Staff are also required to report immediately any staff neglect that may have contributed to such an incident or retaliation. This policy as well as staff interviews support this standard.

Staff interviews and policy #6-4 (A-b2) support that apart from reporting to designated supervisors or officials staff shall not reveal any information related to a sexual abuse report to anyone except as specified by Platte County Detention Facility policy.

The Platte County Detention Facility's medical and mental health staff according to policy #6-4 (A-5) will report to the PREA Coordinator and Jail Administrator any reported information or suspicion of an incident of sexual abuse or sexual harassment that occurs in the facility or any other facility. Medical and mental health staff disclose limitations of confidentiality and their duty to report to inmates. There have been no instances of this in the past 12 months for documentation review, however it is supported by facility medical and mental health interviews.

No one under 18 years of age is held in this facility. This is supported by policy and interviews. According to policy #6-5 staff members are required to report any instance of sexual abuse or harassment no matter how they receive the information. In addition, the PREA Coordinator will report to the Jail Administrator all allegations of sexual abuse and harassment including third party and anonymous reports. Through interviews it was determined that the PREA Coordinator also has the authority to report incidents directly to law enforcement.

Standard 115.62: Agency protection duties

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

1	15	.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)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. The et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
learn th	nat an in protect) addresses the Platte County Detention Facility's protection duties, more specifically when staff mate is subject to a substantial risk of imminent sexual abuse, the staff will immediately take the inmate. All staff interviews indicate that the facility's duty to protect is well known and I staff had a uniform response when presented with questions pertaining to this issue.
Stan	dard 1	115.63: Reporting to other confinement facilities
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.63	(a)	
•	facility,	eceiving an allegation that an inmate was sexually abused while confined at another does the head of the facility that received the allegation notify the head of the facility or priate office of the agency where the alleged abuse occurred? \boxtimes Yes \square No
115.63	(b)	
•		notification provided as soon as possible, but no later than 72 hours after receiving the ion? \boxtimes Yes $\ \square$ No
115.63	(c)	
•	Does t	he agency document that it has provided such notification? $oxtimes$ Yes \oxtimes No
115.63	(d)	
•		he facility head or agency office that receives such notification ensure that the allegation stigated in accordance with these standards? \boxtimes Yes \square 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)
Instru	ctions f	or Overall Compliance Determination Narrative
compli conclu not me	ance or sions. The et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does randard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
inmate Detent notifica allegat allegat	was sex ion Facil ation per ion. The ion and r	etention Facility policy #6-4 (C-1) addresses that when the facility receives an allegation that an ually abused or witnessed a sexual abuse while confined at another facility, the Platte County ity administrator will notify the head of the facility where the alleged abuse occurred. This Policy #6-4 (C-2) will be made as soon as possible, but no later than 72 hours after receiving the Platte County Detention Facility's PREA Coordinator per Policy #6-4 (C-3) documents both the notifications. The PREA Coordinator will maintain this documentation. No instances have past 12 months for documentation review.
ability	-	(C-4) when the PREA Coordinator receives such a notification he/she will to the best of their nat the allegations are investigated at the facility where the alleged abuse occurred according to s.
Stan	dard 1	15.64: Staff first responder duties
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.64	l (a)	
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Separate the alleged victim and abuser? $\hfill\square$ No
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staff or to respond to the report required to: Preserve and protect any crime scene until original states are seen to collect any evidence? \boxtimes Yes \square No

•	member actions changing	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Request that the alleged victim not take any that could destroy physical evidence, including, as appropriate, washing, brushing teething clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? Yes No
•	member actions changing	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Ensure that the alleged abuser does not take any that could destroy physical evidence, including, as appropriate, washing, brushing teething clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
115.64	(b)	
•	that the	rst staff responder is not a security staff member, is the responder required to request e alleged victim not take any actions that could destroy physical evidence, and then notify y staff? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
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Instructions for Overall Compliance Determination Narrative

Does Not Meet Standard (Requires Corrective Action)

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The Platte County Detention Facility (PCDF) has first responder policy #6-4 (D 1-4) in place for allegations of sexual abuse. The policy covers all aspects required in standard. There have been no incidents in the past 12 months; however random staff interviews support this standard and demonstrate that staff are knowledgeable of the process.

PCDF policy also address that if the first staff responder is not a security staff member, the responder shall request that the alleged victim not take any actions that could destroy physical evidence, and then that responder shall notify security staff.

Standard 115.65: Coordinated response

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

115.65 ((a)
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■ 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

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

Instructions for Overall Compliance Determination Narrative

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

The Platte County Detention Facility (PCDF) plan is detailed in the facility's PREA policy and procedure. The plan was developed to coordinate actions taken in response to an incident of sexual abuse. This plan is broken down into responsibilities for investigators, medical, first responders and PREA coordinator. The PCDF also utilizes evidence and investigation forms as well as victim response forms as a step by step guide to insure all aspects are covered. PCDF also has existing MOU's and contracts in places to support their coordinated response efforts. Policy, documentation, MOU's, contracts and interviews support this standard.

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

	1	15	.66	(a)
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• 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)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Per Platte County Government policy overall the Platte County Detention Facility has the authority to suspend employees pending the outcome of an investigation. This was confirmed through informal interviews with the Jail Administrator, PREA Coordinator and after reviewing the staff disciplinary policy.

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? \boxtimes Yes \square No
•	Has the agency designated which staff members or departments are charged with monitoring retaliation? \boxtimes Yes $\ \square$ 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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

•	for at le	t in instances where the agency determines that a report of sexual abuse is unfounded, east 90 days following a report of sexual abuse, does the agency: Monitor negative mance reviews of staff? \square Yes \square No
•	for at le	t in instances where the agency determines that a report of sexual abuse is unfounded, east 90 days following a report of sexual abuse, does the agency: Monitor reassignments $? \boxtimes \text{Yes} \Box \text{ No}$
•		he agency continue such monitoring beyond 90 days if the initial monitoring indicates a uing need? $oximes$ Yes \oximes No
115.67	' (d)	
•		case of inmates, does such monitoring also include periodic status checks? $\ \square$ No
115.67	' (e)	
•	the age	other individual who cooperates with an investigation expresses a fear of retaliation, does ency take appropriate measures to protect that individual against retaliation? \Box No
115.67	' (f)	
•	Audito	r is not required to audit this provision.
Audito	or Over	all 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)
nstru	ctions f	for Overall Compliance Determination Narrative
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The Platte County Detention Facility (PCDF) has developed detailed polices on retaliation, specifically policies #6-9 (G & I). PCDF employs multiple protection measures including classification changes, housing changes including protective custody, transfers and emotional support service. There are also multiple steps listed that may be taken to protect staff as well. These measures are also supported by mental health service contracts and interviews that were conducted.

Policy #6-9 (I) addresses the monitoring of retaliation for at least 90 days for both staff and inmate. Policy lays out items to be monitored that may show retaliation against inmates as well as staff. The monitoring can continue beyond 90 days as long as necessary. The PREA Coordinator will follow up with victims at least weekly according to policy and interviews. This monitoring extends to any other individual who cooperate with an investigation also. This standard is supported by policy as well as interviews.

Standard 115.68: Post-allegation protective custody

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

11	5	.68	(a)
	J	·vv	\u

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

Instructions for Overall Compliance Determination Narrative

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Platte County Detention Facility policy #6-9 (H) addresses that any use of segregated housing to protect an inmate which is alleged to have suffered sexual abuse is subject to the requirements of protective custody covered in policy #7-4 and standard 115.43. There have been no instances within the last 12 months.

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).] \square Yes \square No \boxtimes 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).] \square Yes \square No \boxtimes 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? \boxtimes Yes \square 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? \boxtimes Yes \square No		
•	Do investigators interview alleged victims, suspected perpetrators, and witnesses? $\ \ \ \ \ \ \ \ \ \ \ \ \ $		
•	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? \boxtimes Yes $\ \square$ 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No		

115.71	(f)
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No
115.71	(h)
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? \boxtimes Yes $\ \square$ 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? \boxtimes Yes \square No
115.71	(i)
•	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	(1)
•	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).) \boxtimes Yes \square No \square NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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The Platte County Detention Facility (PCDF) is not responsible for conducting any form of criminal or administrative sexual abuse and sexual harassment investigations. The PREA Coordinator will begin an initial investigation. If that investigation yields anything of a sexual nature referral will be made to trained investigators with either the Platte County Sheriff's Office or the Nebraska State Patrol through the States Attorney General's Office. Any collection of evidence, interviews and reviewing or reports will be done by those specific agencies. Policy #6-10, documentation and interviews support this standard.

Referenced law enforcement agencies will consult with prosecutors in regard to evidence, compelled interviews and the credibility of witnesses. This will not be handled by the PDCF or its staff.

An administrative investigation will be completed by staff in addition to any outside law enforcement investigation to determine if staff actions or failures to act contributed to the abuse. This is also supported by policy #6-10.

Outside law enforcement agencies criminal investigations according to policy #6-10 will be documented in a written report that contains a thorough description of physical, testimonial, documentary evidence and copies will be attached to all documentary evidence where feasible.

Investigation documentation provided by the investigating law enforcement agency was reviewed to further support this standard. The Platte County Detention Facility's PREA Manager maintains relevant investigation documentation.

Platte County Detention Facility policy states that all substantiated allegations of conduct that appear to be criminal will be referred to the Platte County Attorney for prosecution by the investigative agency. There have been no substantiated allegations of conduct that appear to be criminal referred for prosecution since the last PREA audit.

PCDF will request written reports from the investigating agency. The Jail Administrator will retain all written reports as long as the alleged abuser is incarcerated or employed by the facility, plus five (5) years.

According to policy #6-10 (C) the departure of the alleged abuser or victim from employment or control of the facility shall not provide a basis for terminating the investigation.

PCDF policy calls for the facility to cooperate with outside investigators. This is supported by interviews, documentation and policy.

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)

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

Instructions for Overall Compliance Determination Narrative

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The Platte County Detention Facility (PCDF) is not responsible for conducting any form of criminal or administrative sexual abuse and sexual harassment investigations. The PREA Coordinator will begin an initial investigation. If that investigation yields anything of a sexual nature referral will be made to trained investigators with either the Platte County Sheriff's Office or the Nebraska State Patrol through the States Attorney General's Office. PCDF policy addresses evidentiary standard 115.72 by stating that the facility shall impose no standard higher than a preponderance of evidence in determining whether allegation of sexual abuse or sexual harassment are substantiated in administrative investigations. Keeping in mind that outside law enforcing agencies will conduct these investigations.

Standard 115.73: Reporting to inmates

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

115.73	B (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? \boxtimes Yes \square No
115.73	3 (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.) \boxtimes Yes \square No \square NA
115.73	3 (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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No
115.73	3 (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

•	does the	ing an inmate's allegation that he or she has been sexually abused by another inmate, he agency subsequently inform the alleged victim whenever: The agency learns that the d abuser has been convicted on a charge related to sexual abuse within the facility? \Box No	
115.73	(e)		
•	Does t	he agency document all such notifications or attempted notifications? $oxtimes$ Yes \odots No	
115.73	(f)		
•	Audito	r is not required to audit this provision.	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

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Following an investigation into an inmate's allegation that he or she suffered sexual abuse in the Platte County Detention Facility, the PREA Coordinator shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. This standard is supported by policy #6-10 (E), documentation and interviews.

If the Platte County Detention Facility did not conduct the investigation the PREA Coordinator or Jail Administrator will request that the investigating agency follow the requirements of this standard. Interviews and investigative documentation supports this standard.

Policy #6-10 (G) states that following an inmate's allegation that a staff member has committed sexual abuse against him or her, the PREA Coordinator shall subsequently inform the inmate (unless the PCDF or outside law enforcement has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the inmate's pod;
- The staff member is no longer employed at the facility;
- The facility learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or

• The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

PCDF policy #6-10 (H 1-2) states that following an inmate's allegation that he or she has been sexually abused by another inmate, the PREA Coordinator shall subsequently inform the alleged victim whenever:

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

All such notifications or attempted notifications shall be documented. The Platte County Detention Facility's obligation to report under this standard shall terminate if the inmate is released from the agency's custody

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

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

11	5.	.76	(a)
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■ Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?

☐ 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 			
Audito	r Over	all 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)		
Instru	ctions	for Overall Compliance Determination Narrative		
complia conclus not me	ance or sions. T et the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's this discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.		
includir membe	ng termi ers who	Detention Facility policy #6-11 (A) states that staff are subject to disciplinary sanctions up to and nation for violating agency sexual abuse policies. The presumptive disciplinary sanction for staff have engaged in sexually abusive contact or penetration is termination. No incidents have he past 12 months for data review.		
comme history, actually	nsurate, and the engagi	actions for violations of agency policies relating to sexual abuse or sexual harassment shall be with the nature and circumstances of the acts committed, the staff member's disciplinary e sanctions imposed for comparable offenses by other staff with similar histories. Instances of ng in sexual abuse will result in criminal charges. This is supported by policy #6-11 (A-3). No stype have occurred in the past 12 months.		
violatio termina	ns of ag ated if n	ove occurred in the past 12 months however policy #6-11 (A-4) states that all terminations for ency sexual abuse or sexual harassment policies, or resignations by staff who would have been of for their resignation, shall be reported to law enforcement agencies, unless the activity was inal, and to any relevant licensing bodies.		
Stan	dard 1	115.77: Corrective action for contractors and volunteers		
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report		
115.77	' (a)			
		contractor or volunteer who engages in sexual abuse prohibited from contact with $oxed{u}$ s? $oxed{\boxtimes}$ Yes $oxed{\square}$ No		

•	•	es (unless the activity was clearly not criminal)? Yes No	
•	•	contractor or volunteer who engages in sexual abuse reported to: Relevant licensing ? \boxtimes Yes $\ \square$ No	
115.77	(b)		
•	contrac	case of any other violation of agency sexual abuse or sexual harassment policies by a ctor or volunteer, does the facility take appropriate remedial measures, and consider to prohibit further contact with inmates? \boxtimes Yes \square No	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

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Platte County Detention Facility policy #6-11 (B-1 & C-1)) supports the standard by stating that any contractor/volunteer will be prohibited from contact with inmates and shall be reported to law enforcement agencies and to relevant licensing bodies, unless the activity was clearly not criminal.

Under policy #6-11 (B-2 & C-2) the facility will take appropriate remedial measures and shall consider whether to prohibit further contact with inmates in the case of any other violation of the facility's sexual abuse or sexual harassment policies by a contractor/volunteer.

Furthermore, per policy #6-11 (B-3 & C-3) the PREA Coordinator will contact the contractor's employer to notify them of the situation and any further action the facility will take.

Standard 115.78: Disciplinary sanctions for inmates

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

445 79 (a)		
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)		
■ 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

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

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Platte County Detention Facility (PCCF) policy #6-11 (D 1-4) Disciplinary Sanctions for inmate states that:

- Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative ruling that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.
- Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's
 disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar
 histories.
- The disciplinary process must consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
- PCDF may offer therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse as part of a sanction to participate such interventions as a condition of access to further programing or other benefits.

There have been no instances in the past 12 months. Interviews also support this standard.

According to policy #6-11 (D-5) PCDF may discipline an inmate for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact.

For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident even if an investigation does not establish evidence sufficient to substantiate the allegation. This is supported by policy #6-11 (D-6).

The Platte County Detention Facility (PCDF) prohibits all sexual activity between inmate/detainees and will discipline inmate/detainees for such activity. However, PCDF may not deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

MEDICAL AND MENTAL CARE

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

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All Yes/No Questions	wust be A	Answered by the	Auditor to C	omblete the Rebort

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.) \square Yes \square No \boxtimes NA
115.81	(b)
; 1	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.) \square Yes \square No \bowtie NA
115.81	(c)
1	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? \boxtimes Yes \square No
115.81	(d)
i	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? \boxtimes Yes \square No
115.81	(e)
1	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? \boxtimes Yes \square No

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

Auditor Overall Compliance Determination

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Platte County Detention Facility (PCDF) policy #6-12 (A) states that if during the initial medical and mental health screening an inmate states that they have experienced prior sexual victimization, whether it occurred in an institutional setting or in the community medical staff will ensure they are offered a follow up meeting with a medical or mental health practitioner within 14 days. Even though PCDF is not a prison it does have a current contract with the Nebraska Department of Correctional Services and houses state inmates so these standards would apply and the facility does have policies and practice in place to address these services even though they are non-applicable.

PCDF policy #6-12 states that any information related to sexual victimization or abusiveness that occurred in an institution setting shall be limited to medical and mental health practitioners and other staff, as necessary to inform treatment plans, security and management decisions including housing, work and educational programing.

PCDF policy #6-12 also states that Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. This policy is in place to support standards however no one under the age of 18 is housed at the Platte County Detention Center. The will be housed at the Northeast Nebraska Juvenile Services Facility until they are 18 years old then they will be transferred to the PCDF.

These standards were backed by policy, supporting documentation and interviews.

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)	
•	treatm medica	nate victims of sexual abuse receive timely, unimpeded access to emergency medical ent and crisis intervention services, the nature and scope of which are determined by all and mental health practitioners according to their professional judgment? \Box No
115.82	2 (b)	
•	sexual	ualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, do security staff first responders take preliminary steps to protect the pursuant to § 115.62? \boxtimes Yes \square No
•		curity staff first responders immediately notify the appropriate medical and mental health ioners? \boxtimes Yes $\ \square$ No
115.82	2 (c)	
•	emerg	mate victims of sexual abuse offered timely information about and timely access to ency contraception and sexually transmitted infections prophylaxis, in accordance with sionally accepted standards of care, where medically appropriate? \boxtimes Yes \square No
115.82	2 (d)	
•	the vic	eatment services provided to the victim without financial cost and regardless of whether eatim names the abuser or cooperates with any investigation arising out of the incident? \Box No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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Platte County Detention Center (PCDF) policy # 6-12 (B) states that victims of sexual abuse have timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and immediately notify the on-call medical personnel with contract provider Advanced Correctional Health Services. Policy also calls for EMT's to be contacted if needed. This standard is also supported by interviews with medical staff.

PCDF policy #6-12 supports that inmate victims of sexual abuse while incarcerated shall be 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. This policy was also supported by medical staff interviews.

Policy #6-12 (B) states that treatment services are provided at no cost to the victim in regard to standard 115.21 this policy further states that there would be no cost to victims regardless if they name the abuser or cooperates with the investigation.

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

15.83	(a)
i	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? \boxtimes Yes \square No
15.83	(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)	
•		mate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy (N/A if all-male facility.) \boxtimes Yes \square No \square NA
115.83	(e)	
•	receive	nancy results from the conduct described in paragraph § 115.83(d), do such victims e timely and comprehensive information about and timely access to all lawful pregnancy-medical services? (N/A if all-male facility.) \boxtimes Yes \square No \square NA
115.83	(f)	
•		mate victims of sexual abuse while incarcerated offered tests for sexually transmitted ons as medically appropriate? $oxtimes$ Yes \oxtimes No
115.83	(g)	
•	the vic	eatment services provided to the victim without financial cost and regardless of whether tim names the abuser or cooperates with any investigation arising out of the incident? \Box No
115.83	(h)	
•	inmate when o	acility is a prison, does it attempt to conduct a mental health evaluation of all known e-on-inmate abusers within 60 days of learning of such abuse history and offer treatment deemed appropriate by mental health practitioners? (NA if the facility is a jail.) \square No \square NA
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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Platte County Detention Facility (PCDF) policy # 6-12 (C) and interviews support that the facility provides ongoing medical and/or mental health evaluations and treatments to all known victims of sexual abuse. The evaluation and treatment of sexual abuse victims includes appropriate follow-up services, treatment plans, and, when necessary referrals for continued care following their release from custody. The level of medical and mental health care provided to inmate victims must be consistent with the community level of care generally accepted by the medical and mental health professional communities.

PDCF policy and interviews with medical/mental health staff also support this standard in that inmate victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests. In addition, if pregnancy results from the conduct described in 115.83 (d), such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. There were no reported incidents of this type during this reporting period.

Inmate victims of sexual abuse while incarcerated will be offered testing for sexually transmitted infections as medically appropriate. This is supported by policy # 6-12 (C). In addition, policy # 6-12 (C) states that treatment services must be provided free of charge to the victim regardless of whether the victim names the abuser or cooperates with the investigation.

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)		
•		he review team include upper-level management officials, with input from line isors, investigators, and medical or mental health practitioners? \boxtimes Yes \square No	
115.86	(d)		
•		he review team: Consider whether the allegation or investigation indicates a need to e policy or practice to better prevent, detect, or respond to sexual abuse? \boxtimes Yes \square No	
•	ethnicit	he review team: Consider whether the incident or allegation was motivated by race; ty; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or yed status; gang affiliation; or other group dynamics at the facility? \boxtimes Yes \square No	
•		he review team: Examine the area in the facility where the incident allegedly occurred to whether physical barriers in the area may enable abuse? \boxtimes Yes \square No	
•	Does the shifts?	he review team: Assess the adequacy of staffing levels in that area during different \boxtimes Yes $\ \square$ No	
•		he review team: Assess whether monitoring technology should be deployed or nted to supplement supervision by staff? \boxtimes Yes \square 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)		
•		he facility implement the recommendations for improvement, or document its reasons for ng so? \boxtimes Yes $\ \square$ No	
Audito	r Overa	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

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Platte County Detention Facility (PCDF) has established an incident review team which according to policy may consist of the PREA coordinator, Shift Sergeant, a member of the medical staff and the Chief Deputy as a representative from the Sheriff's Department. This team reviews all data collected involving a sexual abuse incident. This team will 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. These incident reviews will take place within 30 days of the conclusion of all sexual abuse investigations unless the allegation has been determined to be unfounded. The team will seek input from line staff, investigators, medical and mental health practitioners. This standard is support by PCDF policy #6-13 (A. 1-3), staff interviews and investigation documentation.

The incident review team evaluates each incident of sexual abuse and:

- Considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- Considers whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
- Examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Assesses the adequacy of staffing levels in that area during different shifts.
- Assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- Prepares a report of its findings, including but not necessarily limited to determinations made pursuant to PREA standard 115.86 (d)(1) -(d)(5), and any recommendations for improvement and submit such report to the facility head.

This standard was supported by PDCF policy #6-13 (A-4), documentation and interviews.

According to Platte County Detention Facility (PCDF) policy #6-13 (A-4g), documentation and interviews the PCDF will implement recommendations for improvement made by the incident review team or document its reason for not doing so. The PREA Coordinator will securely maintain documentation of this report.

Standard 115.87: Data collection

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

115.87	(a)	
	D	
•		he agency collect accurate, uniform data for every allegation of sexual abuse at facilities ts direct control using a standardized instrument and set of definitions? ⊠ Yes □ No
115.87	(b)	
•		he agency aggregate the incident-based sexual abuse data at least annually? $\hfill\Box$ No
115.87	(c)	
•	from th	the incident-based data include, at a minimum, the data necessary to answer all questions be most recent version of the Survey of Sexual Violence conducted by the Department of $\mathbb{R}^2 \times \mathbb{R}^2$ Po
115.87	(d)	
•	docum	he agency maintain, review, and collect data as needed from all available incident-based ents, including reports, investigation files, and sexual abuse incident reviews?
115.87	(e)	
•	which i	he agency also obtain incident-based and aggregated data from every private facility with t contracts for the confinement of its inmates? (N/A if agency does not contract for the ement of its inmates.) \boxtimes Yes \square No \boxtimes NA
115.87	(f)	
•	Depart	he agency, upon request, provide all such data from the previous calendar year to the ment of Justice no later than June 30? (N/A if DOJ has not requested agency data.) □ No □ NA
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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

The Platte County Detention Facility PCDF, specifically the PREA Coordinator is responsible for collecting accurate, uniform data for every reported incident of sexual abuse using a standardized instrument and set of definitions. The PCDF aggregates the incident-based sexual abuse data at least annually. The incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the BJS Survey on Sexual Violence. Data is obtained from multiple sources, including reports, investigation files, and sexual abuse incident reviews. This facility does not contract out its inmate population. Standard 115.87 is well supported by PCDF policy #6-13 (B-1), reports, Survey of Sexual Victimization forms, data and interviews.

Standard 115 88: Data review for corrective action

	11	5	.88	(a)
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Starr	data 113.00. Data review for corrective action
All Ye	s/No Questions Must Be Answered by the Auditor to Complete the Report
115.88	3 (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? \boxtimes Yes \square 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? \boxtimes Yes \square 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? \boxtimes Yes \square No
115.88	3 (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 \boxtimes Yes \square No
115.88	3 (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)	
from the re	agency indicate the nature of the material redacted where it redacts specific material eports when publication would present a clear and specific threat to the safety and a facility? \boxtimes Yes \square No
Auditor Overall (Compliance Determination
□ Ех	ceeds Standard (Substantially exceeds requirement of standards)
	eets Standard (Substantial compliance; complies in all material ways with the andard for the relevant review period)
	es Not Meet Standard (Requires Corrective Action)
Instructions for	Overall Compliance Determination Narrative
compliance or non conclusions. This not meet the stand	w must include a comprehensive discussion of all the evidence relied upon in making the a-compliance determination, the auditor's analysis and reasoning, and the auditor's discussion must also include corrective action recommendations where the facility does dard. These recommendations must be included in the Final Report, accompanied by ecific corrective actions taken by the facility.
data collected to a policies, and training	e County Detention Facility (PCDF) policy #6-13 (C-1) the administrative review team reviews ssess and improve the effectiveness of its sexual abuse prevention, detection, and response ag. The PCDF will use this data to identify potential problem areas, take corrective action on areas a report annually of its findings and corrective actions for the facility.
prior years and pro approved by the Ja PCDF may redact sp the safety and second	also includes a comparison of the current year's data and corrective actions with those from ovides an assessment of the agency's progress in addressing sexual abuse. The PCDF report is all Administrator and made readily available to the public on the Platte County website. The occific material from the reports when publication would present a clear and specific threat to urity of the facility, but it must indicate the nature of the material redacted. Policy, county reports as well as interviews support compliance with the standard.
Standard 115	5.89: Data storage, publication, and destruction
All Yes/No Ques	tions Must Be Answered by the Auditor to Complete the Report
115.89 (a)	
■ Does the a	agency ensure that data collected pursuant to § 115.87 are securely retained?

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? \boxtimes Yes \square No		
115.89	(c)		
•		he agency remove all personal identifiers before making aggregated sexual abuse data γ available? \boxtimes Yes \square No	
115.89 (d)			
•	years a	he agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 after the date of the initial collection, unless Federal, State, or local law requires ise? \boxtimes Yes \square No	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

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

Platte County Detention Facility (PCDF) policy #6-13 (D. 1-3) ensures that the collected sexual abuse data is properly stored, securely retained, and protected by the PREA Coordinator. The PCDF makes all aggregated sexual abuse data, from this facility and those with which it contracts, readily available to the public at least annually through its website. Before making aggregated sexual abuse data publicly available, the PDCF removes all personal identifiers from the data. The PCDF maintains this data for at least 10 years after the date of its initial collection. In addition to facility policy PREA Standard 115.89 is also supported by documentation, county website and information gained through interviews with the PREA Coordinator.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

ΔΙΙ	Vac/Na	Ougstions	Must Ro	Answered by the	Auditor to	Complete	the Report
AII.	1 62/140	QUESTIONS	wust be	Alisweled by ti	ie Auditoi to	Complete	ille Keboli

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? (<i>Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.</i>) ⊠ 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 <i>third</i> 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 						

Auditor Overall Compliance Determination П **Exceeds Standard** (Substantially exceeds requirement of standards) \times 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 narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility. The Platte County Detention Facility (PCDF) only operates one facility. This facility has had one prior PREA Audit in 2016. This Auditor had total access to and the ability to observe all areas of the Platte County Detention Facility. This Auditor was also permitted to request and received copies of all relevant documentation including electronically stored information. In addition, I was able to conduct private interviews with inmates, staff, volunteers and contractors. Inmates as well as staff were able to correspond with this Auditor in the same manner as communication with legal counsel. This standard was supported by this Auditors experience while in the PCDF, supporting documentation, interviews and observations. 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 within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the

Final Audit Report issued.) \boxtimes Yes \square No \square NA

case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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

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

Auditor Overall Compliance Determination

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

The Platte County Detention Center (PCDF) first underwent their initial PREA audit in 2016. After the finding of full compliance with PREA Standards PCDF initially made their Final Audit Report available to the public at the facility in their lobby area. Later the report was posted to the PCDF website. During the on-site audit the website was experiencing technical difficulties and was temporarily down, however at the time of this report the PCDF website was operational and the required information was back up and able to be accessed by the public.

AUDITOR CERTIFICATION

I certify that

- 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. Auditors are not permitted to submit audit reports that have been scanned. See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Chris W. Harrifeld	<u>July 1, 2019</u>		
	· · · · ·		
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.