

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: November 10 , 2016

Auditor Information			
Auditor name: Thomas Eisenschmidt			
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Email: tome8689@me.com			
Telephone number: 315-255-2688			
Date of facility visit: August 14-16, 2016			
Facility Information			
Facility name: Northwestern Joint Regional Correctional Facility			
Facility physical address: Bldg 1450 Alder Road, Joint Base Lewis-McChord, WA 98433			
Facility mailing address: <i>(if different from above)</i>			
Facility telephone number: 253-967-5243			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input checked="" type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Commander Stephen T. Newman			
Number of staff assigned to the facility in the last 12 months: 316			
Designed facility capacity: 150			
Current population of facility: 112 including 1 female			
Facility security levels/inmate custody levels: minimum-maximum			
Age range of the population: 20-48			
Name of PREA Compliance Manager: Michael Borlin		Title: ACA/PREA Compliance Manager	
Email address: michael.h.borlin.civ@mail.mil		Telephone number: 253-967-5243	
Agency Information			
Name of agency: Army Corrections Command			
Governing authority or parent agency: <i>(if applicable)</i> Department of the Army			
Physical address: 2530 Crystal Drive Suite 8000, Crystal City, 22202			
Mailing address: <i>(if different from above)</i>			
Telephone number: (703) 428-7713			
Agency Chief Executive Officer			
Name: Gregory Stroebel		Title: Director of Army Corrections Command (ACC)	
Email address: gregory.j.stroebel.civ@mail.mil		Telephone number: (703) 545-5935	
Agency-Wide PREA Coordinator			
Name: Larry Kester		Title: ACC PREA Coordinator	
Email address: larry.j.kester.civ@mail.mil		Telephone number: (703) 545-5920	

AUDIT FINDINGS

NARRATIVE

The PREA audit of the Northwestern Joint Regional Correctional Facility (NWJRCF) was conducted by Thomas Eisenschmidt, PREA Auditor. The auditor received PREA related documents from NWJRCF approximately 5 weeks prior to the audit.

The entrance briefing for the PREA audit was held on August 15, 2016. Once the overview was completed the tour of the entire facility was started and finished in approximately 5 hours. Interviews of random inmates from each of the housing units, inmates disclosing prior victimization, inmates reporting allegations of sexual assault, and inmates identifying LGBTI were interviewed. This number totaled 25 prisoners of the 112 prisoner population being interviewed.

Once the prisoner interviews and random staff (15) were completed the specialized staff interviews were conducted. They included the following staff: Medical staff, Human Resources Mid-Level Supervisors, Intake Staff, Risk of Victimization Assessment staff, Behavioral Health staff, Segregation Supervisor, Retaliation Monitor, Volunteer, Outside Advocate (SARC) Incident Review Team Member, PREA Compliance Manager, Military Police (MP) Investigator, Criminal Investigation Command (CID) Investigator and the Commander (Warden).

Training records for mandatory PREA training was checked. Additionally training records for the MP Investigators, full and part time Medical and Behavioral Health staff were reviewed.

The auditor spent a significant amount of time with the MP Investigator reviewing his investigative files. The NWJRCF Investigator is very conscientious about his duties and responsibilities. The auditor reviewed case files, from August 2015 thru August 2016. During this 12 month period there were four (4) PREA allegations made and investigated. Three (3) of these allegations were sexual abuse allegations and one (1) sexual harassment allegation.

Of the three sexual abuse allegations two (2) of these are completed with one (1) still pending. One of these involved staff and was substantiated and one involved another inmate and was unfounded. The sexual harassment case was completed and involved prisoner against prisoner. The case was unsubstantiated.

At the conclusion of the site visit at the Northwestern Joint Regional Correctional Facility the auditor met with Commander Newman and his Command Staff. The auditor let those in attendance know that he could not give them a specific outcome at this point but did leave them with some preliminary findings. He thanked everyone for their obvious hard work and asked them to continue their commitment to ensure compliance to the Prison Rape Elimination Act.

The Interim Report was issued in August 16, 2016 finding the facility not meeting three standards (115.41, 115.67, and 115.73). The facility and the auditor developed a corrective action plan that was finalized with documentaion provided to the auditor during the months of September, October and November demonstrating the facility complied with all aspects of each of the standards in question.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Northwestern Joint Regional Correctional Facility (NWJRCF) is located on the Joint Base Lewis-McChord in the state of Washington just outside of Seattle. The facility houses offenders from all branches of the military. Female prisoners may be housed for pre-trial purposes only. There is currently one female prisoner. The facility was built in 1956 and has not had any new construction or renovations since that time. NWJRCF enjoys the support and services of the military base. Menus and medical care are the same as is offered to enlisted personnel on the base as the offenders are still military soldiers until their sentences are complete and they are discharged.

NWJRCF was accredited by the American Correctional Association in 1996 and received reaccreditation until 2008 when they underwent a long period of repair and upgrades. Initially ACA granted the facility an extension on its accreditation. When the repairs lasted longer than one year, ACA determined that since the last audit had been five years earlier, the next audit would be turned into an initial audit. The facility was awarded reaccreditation which it has maintained to date.

There are ten buildings dedicated to the facility. The first small building at the entrance is the Temporary Release Building where incoming and outgoing prisoners are processed. The main building houses the entry checkpoint, administrative offices, central control, medium and maximum housing, clinic, library, visitation, and barber vocation. Supply has a dedicated building with several storage containers next to the building. This area processes offenders with supplies and clothing/bedding. They also store commissary supply, and office supplies. The minimum security dormitory is housed in a separate building. That building has a large indoor weight room utilized by all offenders on a schedule, and a segregation unit that is only used for overflow when needed. At the time of the audit the segregation unit was not in use. There is another building housing human resources, training, Chaplain, and the fiscal staff. Next there is a building divided into two large classrooms that is multipurpose but primarily used for counseling programs. A small building to the rear of the compound houses four offenders and their canine dogs. A large building also in the rear of the compound houses the Chapel and the laundry. Next there is a large carpentry shop housing one of the vocations. The rear of the compound has sheds housing landscaping, equipment, composting, three greenhouses which serve the vocation, and a small mini farm with gardens, chickens, and goats.

Outside of the facility and across the parking lot is the Battalion Headquarters for the Military Police Unit which has the facility under its command. This building has an armory which also houses the NWJRCF weapons. There is a large area for staff that has treadmills, weight machines, free weights, television with workout tapes, a pool table, lockers and showers.

The facility receives water, sewer, and electrical services through the base. There are two diesel generators that are able to provide full power for extended periods of time as the base provides the diesel fuel. Generator 1 has a 300 gallon capacity with a life expectancy of 120 hours before being refueled. Generator 2 has a 1500 gallon capacity with a life expectancy of 750 hours before needing to be refueled. The facility kitchen and boiler run off natural gas.

The facility is accessed by a pedestrian sallyport or one of four vehicle sallyports. The perimeter is a double twelve foot fence with a single strand of razor wire at the top. There are two towers which are not manned due to lead paint and asbestos. There are two mobile towers that may be used. One is posted at the recreation yard to provide supervision with large groups of offenders. Gates inside the compound divide the areas and are secured with padlocks

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded: 2

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 2

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

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

The main policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment within the Army Corrections Command is Army Corrections Command (ACC) Policy Letter # 35, Prison Rape Elimination Act (PREA). This document requires each institution within the Command to establish policy and procedural guidelines in preventing and responding to all forms of sexual abuse and sexual harassment. At Northwestern Joint Regional Correctional Facility (NWJRCF) these policy and procedural guidelines are found in Standard Operational Procedure (SOP) 200 and NWJRCF policy letter 43-16. Both these documents detail to staff, volunteers, contractors and prisoners specific prohibitive conduct, training requirements, reporting requirements, investigative process and consequences for violations to these policies. The interviews conducted during the site visit confirmed staff and prisoners knowledge with these policies.

The auditor had the opportunity to again interview Larry Kester, PREA Coordinator for the Army Correction Command (ACC). During his interview it was apparent he had a good understanding of the PREA. He informed the auditor he has sufficient time to perform all his PREA related duties and meets regularly with the Director of Army Corrections Command to discuss PREA matters. He indicated he has direct access to the agency Director and meets regularly to discuss PREA matters with him.

Micheal Borlin is the PREA Compliance Manager at the NWJRCF. During his interview he confirmed that he has direct access to the Commander (Warden) with anything PREA related. He also indicated he has sufficient time to perform his PREA duties.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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This Standard does not apply, as the NWJRCF does not contract with other entities for the confinement of Prisoners.

Standard 115.13 Supervision and monitoring

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

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must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Each facility within the ACC, including MWJRCF, is required to develop and review annually a staffing plan that takes into account items such as; generally accepted detention practices, physical plant, prisoner population and prevalence of substantiated and unsubstantiated sexual abuse allegations when adjusting this staffing plan. The auditor had the opportunity to review this plan and discussed it with the Commander (Warden). He indicated that if there is any deviation from this plan he is immediately notified. Except in extreme emergencies there is never and occasion where they don't have a soldier to cover a post.

According to the PREA Coordinator he reviews, at least annually, the facility-staffing plan and takes into account all allegations making recommendations to the Commander if necessary.

Rounds are made daily on all shifts by all supervisors as required by policy NWJRCF 200-B1. Mid-level supervisors indicated during interviews that they make frequent unannounced rounds on all shifts. These rounds are documented.

Standard 115.14 Youthful inmates

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

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The NWJRCF does not house youthful inmates. In order to enter into Military Service the individual must be at least 17 years of age. If a 17 year old enters pretrial confinement, the individual would be designated to be housed as the Midwest Joint Regional Correctional Facility. This is the ACC facility designated to house youthful inmates. If a soldier is convicted of a crime with a long sentence length, he would remain at the MWJRCF until he attained the age of 18. The Army Corrections Command policy letter #35 is in compliance with all aspects of this standard.

Standard 115.15 Limits to cross-gender viewing and searches

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

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

Cross gender strip searches are not allowed in any of the Army facilities except in exigent circumstances. This dictate can be found in the ACC Policy Letter #35. If a body cavity search must be done it has to be conducted by medically trained staff. This same policy also prohibits staff from frisking transgender and intersex inmates for the purpose of determining genitalia status. The auditor reviewed training lesson plans, which demonstrated this information is provided to everyone working at the NWRCF. Interviews with staff confirmed their knowledge of these policies and mandated practices as well the proper procedures for conducting cross-gender pat-down searches and

searches of transgender and intersex inmates in a professional and respectful manner.

During the tour the auditor did not encounter privacy concerns where prisoners did not have the opportunity to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their buttocks or genitalia. Male and female staff announce their presence each time they enter a crossgender housing unit. This was observed during the tour and confirmed by the prisoners during their interviews.

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

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

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

Any individual entering military service must be proficient in English. The NWJRCF ensures that prisoners with disabilities assigned to the facility 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. There were no prisoners at NWJRCF with sight or hearing disabilities for the auditor to interview.

Standard 115.17 Hiring and promotion decisions

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

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NWJRCF ensures that a background check is performed on every individual who enters the facility as an employee, contractor or volunteer. Anyone convicted of, or adjudicated of a sexual assault/abuse will not be promoted or even hired at the facility as outlined in policy NWJRCF 200-AI. This same policy requires background checks be conducted through the NCIC system on every person prior to them being allowed to enter the facility. These individuals are issued an ID badge which is good for three years. Once the badge expires a new background check is performed prior to the issuing of a new ID. The NWJRCF will 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

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

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

There are currently 128 cameras in place at the NWJRCF. Of these, only 78 are currently operational. The facility is currently undergoing an electronic security system upgrade as it pertains to cameras. Placement of these new cameras considered how locations would enhance the facility ability to protect prisoners from sexual abuse. This was confirmed by the PREA Compliance Manager who attended a meeting on their locations.

Standard 115.21 Evidence protocol and forensic medical examinations

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

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Every allegation of sexual assault is considered a crime and referred to the Criminal Investigation Command (CID) by the NWJRCF. This Criminal Investigator and the Military Police Investigator follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Based on the Memorandum of Understanding between the Army Corrections Command and the U.S. Army Criminal Investigation Command dated 2014 the evidence protocols are adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication

Madigan Army Medical Center is the hospital that NWJBCF utilizes for all forensic exams. These exams, when performed, are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) whenever possible. If a SAFEs or SANEs staff is not available, a qualified medical practitioner performs the examination. There is no cost to the prisoner for any part of this exam or any follow up if necessary. There have been no forensic exams conducted in the last 12 months.

Prisoners may request a victim advocate through the DOD helpline or requesting one directly to a staff member. The helpline would normally contact the installation victim advocate. The helpline or staff contacts the Sexual Harassment Assault Response and Prevention (SHARP) Sexual Assault Response Coordinator (SARC). If requested by the victim, this advocate accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. The auditor spoke with the SARC staff member at length, who confirmed his responsibilities. The auditor also verified his training.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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

corrective actions taken by the facility.

The NWJRCF Policy Letter #44-16 Investigation Referrals and the Army Corrections Command Policy #35 require that an administrative or criminal investigation be completed for all allegations of sexual abuse and sexual harassment at the facility. There is a 2014 MOU between ACC and the CID outlining the responsibilities for each agency in this process. According to both Investigators a case is initiated immediately on every allegation. The Sexual Assault Investigation policy is published on the Army website.

Standard 115.31 Employee training

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

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The auditor spent time reviewing training files and reviewing training curriculum pertaining to PREA. NWJRCF records include completed PREA training for all staff for years 2015 and 2016. Everyone currently working at the facility has received PREA training. For training year 2015 the facility utilized an old sign in form that did not include an acknowledgement of "understanding" the training presented. Agency policy requires all staff receive annual refresher training on PREA and Army Correction Commands' Zero Tolerance Policy instead of every two years as required by the standard.

All staff at the MWJRCF is trained as first responders and all carry a credit card sized "PREA responder" card with their responsibilities outlined. Interviews of the random staff and general questions asked during the site visit clearly indicates each staff member understands all policy aspects of the Agency Zero Tolerance of Sexual Abuse and the proper procedures responding to allegations of sexual abuse and sexual harassment.

Standard 115.32 Volunteer and contractor training

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

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

All contractors and volunteers at the NWJRCF must have received PREA training prior to assuming their responsibilities or entering the facility. The auditor reviewed training records for volunteers and contractors currently working and confirmed each signs a PREA training document acknowledging they understand the training. An interview with a contractor confirmed he was aware of his responsibilities with PREA as well as the consequences for any violations to the policy.

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

When every prisoner arrives at the NWJRCF, he/she receives information, verbally and in writing explaining the facility zero-tolerance policy regarding sexual abuse and sexual harassment. This information includes and how and to whom, to report incidents or suspicions of sexual abuse or sexual harassment verbally, anonymously and in writing. The auditor was able to observe the arrival process in which the prisoner is required to read a PREA poster informing them of this information as well as sign for and receive a PREA information packet containing advocacy information and reporting information inside and outside of the institution. These new arrivals are placed in reception (B-Unit) for approximately seven days during which time they receive an in-depth orientation to the facility, which includes a segment on PREA allowing for questions and answers.

Interviews conducted with the intake staff and interviews conducted with prisoners confirmed that PREA information is provided both verbally and in writing to the prisoners. Besides the formal classroom and printed documents the NWJRCF has informational posters in the living areas, entrance to the facility and in the visiting room. These posters state the Army's zero tolerance policy listing phone numbers and addresses to report and to receive support services if needed.

Standard 115.34 Specialized training: Investigations

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

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The Military Police Investigator received "PREA- Investigating Sexual Abuse in Confined Spaces Training" through the National Institute of Corrections. The CID Investigator indicated he received Sexual Abuse training during his routine investigative training which included interviewing in confined settings. The NWJRCF has two trained investigators at the facility and the auditor verified their training and the training curriculum which included techniques for interviewing sexual abuse victims in confine settings, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Both investigator interviews confirmed each take into account the mental illnesses, intellectual disabilities, and other issues that evolve with the specialty populations when conducting investigations. Both agencies ensure proper and frequent communication is maintained so that cases are not lost due to poor communications. As previously noted this this communication requirement is stipulated in the agencies MOU.

Standard 115.35 Specialized training: Medical and mental health care

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The full time and part time medical and behavioral health staff at the NWJRCF receive additional specialized training as required by Army Corrections Command Policy #35 through the National Institute of Corrections. This is in addition to the mandated PREA training provided to every staff member. The training is documented in each staff training record with a certificate being issued. The specialized training that each receive covers: how to detect and access signs of sexual abuse and sexual harassment, how to preserve evidence, how to respond to victims and how and to whom to report incidents. Interviews with medical and behavioral health staff confirmed this specialized training was received.

Standard 115.41 Screening for risk of victimization and abusiveness

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

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The Army policy requires each prisoner arriving at the NWJRCF receives a screening for risk of sexual abuse victimization or sexual abusiveness toward other prisoners. This is normally completed on the day of arrival but must be accomplished within 72 hours of arrival. The staff person conducting the intake asks each prisoner: 1) Whether they have a mental, physical, or developmental disability; (2) the age of the prisoner; (3) assesses the physical build of the prisoner; (4) asks whether the prisoner has previously been incarcerated. (5) assesses whether the prisoner's criminal history is exclusively nonviolent; (6) determines whether the prisoner has prior convictions for sex offenses against an adult or child; (7) asks whether the prisoner is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) asks whether the Prisoner has previously experienced sexual victimization; (9) the prisoner's own perception of vulnerability; and (10) whether the prisoner is detained solely for civil immigration purposes. Prisoners are not disciplined for failing to answer any of the questions. The intake staff member reviews all available records for criminal history and also determines if the prisoner is perceived to be gender nonconforming during this process. Upon completing the intake and the review of relevant available records the screener assigns points to responses to certain questions. A numerical score and/or answers to specific questions determine if a prisoner is at average risk, above average risk, or at high risk of victimization or abuse. The Army Corrections Command Policy #35 requires that the facility reassess each prisoner's risk of victimization or abusiveness within 30 days after the prisoner's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. Typically this reassessment is done 14 days after arrival.

Follow-on screens were not conducted till December 2015 and a few initial reports were not completed within the first 72 hours of arrival. During the corrective action period NWJRC provided the auditor documentation for a three month period (September, October, and November.) The provided documentaing demonstrated the initial risk screenings were completed within the 72 hour limit and the subsequent reviews were conducted within the 30 days of the prisoners arrival.

Standard 115.42 Use of screening information

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

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recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NWJRCF uses information from the risk screening when making housing unit, bed, work, education, and program assignments, This is done with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive. This practice was confirmed during the interview with the individual responsible for performing the intake and risk assessments.

The placement of transgendered and/or intersex Prisoners in housing, work or program assignments is done only after a careful review of the case by this committee as well. A committee at the Headquarters Department of the Army level would make the decision with input from the ICB of what facility a transgender or intersex prisoner would be confined.

Standard 115.43 Protective custody

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

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The NWJRCF Policy Letter #43-16 and Army Corrections Command Policy #35 prohibits the placing of any prisoner who may be 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 of this individual from likely abusers. The Commander and Segregation Supervisor confirmed that there have been no cases at the NWJRCF where segregation was used to place a prisoner at high risk of victimization in the last 12 months. The auditor did interview prisoners determined to be at risk for victimization either as a result of the intake screening process or because they had already been victimized. Each indicated they were never placed in segregation.

Standard 115.51 Inmate reporting

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

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

The NWJRCF provides prisoners multiple internal ways to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Verbal or written reports can be made to any staff member, contractor, or volunteer at the facility, prisoners may use the DoD Safe Help Line (*55), or allegations may be made through a third parties as required by Army Corrections Command Policy Letter #35. All verbal reports received are required to be documented in written reports by staff. This policy requirements and practices were confirmed to the auditor during staff interviews and with the interview with the facility investigator.

Prisoners may make reports of sexual abuse or sexual harassment through the DoD Safe Help Line as the private/public entity not associated with the facility. Reports are reported back to the Facility Command providing all information including the prisoners name unless it was requested to be anonymous. Prisoners can also confidentially write to the Assistant Deputy (Corrections Oversight) for any

allegations of sexual abuse and sexual harassment, and the office will immediately notify both the agency (Army Corrections Command) and the respective Army facility. Posters providing this information have been conspicuously posted throughout NWJRCF.

Standard 115.52 Exhaustion of administrative remedies

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

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

This standard is non applicable as the NWJRCF does not have administrative procedures to address prisoner grievances regarding sexual abuse.

Standard 115.53 Inmate access to outside confidential support services

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

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

The NWJRCF provides prisoners with access to emotional support services, related to sexual abuse, through the Department of Defense Safe Hotline. This unmonitored phone call is referred to the outside victim advocate group which provides emotional support services to any victim of sexual abuse whether it occurred inside the facility or it occurred at any time in the prisoners life. Posters throughout the facility list the toll free phone number for this group. Random interviews with prisoners demonstrated their knowledge of the advocacy services and helpline and the interview with the Advocate Staff person confirmed the support services they provide.

Standard 115.54 Third-party reporting

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

There are numerous means for prisoners' families and friends (third party) to file sexual abuse allegation reports on behalf of any prisoner. Poster size notices can be found at the entrance of the facility, areas within the facility family visitors have access too, as well as just about every room at NWJRCF. These posters list names, addresses and phone numbers for facility staff, ranking individuals in Washington, DC and contact information for Agencies not connected to the facility encouraging anyone wishing to, to file sexual abuse allegations on behalf of a prisoner. The NWJRCF also sends an arrival letter to the individual the prisoners has listed as his contact person. This letter informs them the prisoner has arrived safely at the institution and contains visit times. The letter also informs the receiver about the Army and facility zero tolerance policy of sexual abuse and sexual harassment and provides them with contact phone numbers instructing them to report information on allegations of sexual abuse and sexual harassment. Interviews with random prisoners indicated that they were aware of third party reporting.

Standard 115.61 Staff and agency reporting duties

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

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

Army Corrections Command Policy letter #35 and the NWJRCF Policy Letter #43-16 requires all staff to report immediately any knowledge, suspicion, or information regarding any incident of sexual abuse or sexual harassment that occurred in the facility, whether or not it is part of Army Corrections Command. The policies also require reporting any retaliation against prisoners or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews with staff confirmed their knowledge of this reporting requirement as well as their requirement of not revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Standard 115.62 Agency protection duties

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

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

The Army Corrections Command Policy Letter #35 requires that any time the facility learns that a prisoner is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the prisoner. Each staff member interviewed at the NWJRCF detailed in their interviews what action he/she would take upon learning a prisoner was at substantial risk. The well-being and safety of the prisoner was their primary concern. The protocols that they would follow, in most cases, were the identical ones they would follow if a prisoner actually reported he was sexually assaulted. The potential victim would be immediately secured, the supervisor notified, Investigator and PREA Compliance Manager notified. The process was also reaffirmed during the interview with the Commander as well. He indicated that

there have been no reported prisoners at substantial risk during the last 12 months at the NWJRCF.

Standard 115.63 Reporting to other confinement facilities

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

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

The Commander (Warden) at NWJRCF, upon receiving an allegation that a prisoner was sexually abused while confined at another facility, must notify the head of the facility or appropriate office of the agency where the alleged abuse occurred within 72 hours of him becoming aware of the incident. This requirement is mandated in the Army Corrections Command Policy #35 and the NWJRCF Policy Letter #43-16. Notifications are documented by Memorandum for Record (MFR) and are sent via electronic mail to the head of the facility or appropriate office of the agency. There have been no allegations received at the MWJRCF during the last 12 months according to the Commander.

Standard 115.64 Staff first responder duties

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

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

Staff at the NWJRCF after learning that an prisoner may have been sexually abused must: separate the alleged victim and abuser; preserve and protect any crime scene; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence. This is required by Army Corrections Command Policy Letter #35, NWJRCF Policy Letter #43-16 and is part of the training curriculum for all staff. Each of them (soldiers and civilians) is trained as first responders and each carries a card with duties and responsibilities required when responding. During interviews conducted with line staff, mid-level supervisors and Command staff, all were aware of their responsibilities and duties when responding to allegation of sexual assault.

Standard 115.65 Coordinated response

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

NWJRCF 200-E13 is the written institutional plan for the NWJRCF coordinating actions among staff first responders, medical and mental health, practitioners, investigators, and facility leadership in response to any incident of sexual abuse at the facility. Interviews conducted with the specialized staff, listed in this policy, being involved with this coordinated effort, confirmed their knowledge of the policy and involvement in the process.

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

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

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

The NWJRCF has no collective bargaining agreement entered into or renewed since August 2012 that limits their ability to remove alleged staff sexual abusers from contact with any prisoners pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. This was confirmed during the Deputy Director interview and the Commander interview.

Standard 115.67 Agency protection against retaliation

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

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

Army Corrections Command Policy Letter #35 mandates that there is to be no retaliation against any prisoner or staff member who reported sexual abuse or sexual harassment. At the NWJRCF two Non Commissioned Officers (NCO) have the responsibility to protect all prisoners and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other prisoners or staff. The NWJRCF employs multiple protection measures, such as housing changes or transfers for prisoner victims or abusers, removal of alleged staff or prisoner abusers from contact with victims, and emotional support services for prisoners or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. For both prisoners and staff, the retaliation NCO is within the counseling section of the NWJRCF and is charged with monitoring retaliation. Retaliation notifications can also be made to the PREA Compliance Manager, to their Chain of Command, NWJRCF Operations, MPI, Chaplain, I Corps IG, SHARP Coordinator, SARC, EO, or Medical or Mental Health practitioner.

During the site visit the auditor found retaliation monitoring was not consistently being conducted. The auditor requested the facility provided documentation of all monitoring conducted during the three month corrective action period.

The auditor reviewed the retaliation monitoring documentation provided by NWJRCF at the end of this corrective action period and found the monitoring and documentation of same to be in compliance with the Army Policy and standard requirements.

Standard 115.68 Post-allegation protective custody

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

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

Army Corrections Command Policy #35 and NWJRCF Policy Letter #43-16 prohibits the institution from placing prisoners in segregation for protection that they have alleged to have suffered sexual abuse unless no alternative is available. Interviews conducted with the Commander, and the Special Housing Unit Supervisor confirmed that segregation has never been used to house alleged victims of sexual abuse for protection after an alleged sexual assault.

Standard 115.71 Criminal and administrative agency investigations

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

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

Investigations are handled the same at every prison the Army operates. All allegations of sexual abuse, are handled by the Army CID. Sexual Harassment investigations are handled by the facility Military Police Investigative unit. Both groups of investigators receive the same additional specialized PREA investigation training and have a good working relationship. Both the CID Investigators and MP Investigators stated the credibility of an alleged victim, suspect, and witness is assessed on an individual basis and is not determined by the person's status as a prisoner or staff member.

The Administrative investigations handled by the MPI are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. They also try to determine whether staff actions or failures to act were a contributing factor.

The criminal investigations, which are conducted by the CID, are also documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and includes copies of all documentary evidence. The completed report is turned over to the facility Commandant. At a minimum, files on all alleged abusers, prisoner or staff, are maintained for the entire length of sentence or employment, plus five years.

As previously noted investigative files at NWJRCF were reviewed. The files were complete, well documented and in accordance with standard requirements for investigations and retaliation.

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

Army Corrections Command Policy #35 and NWJRCF SOP 200-E imposes no standard higher than a preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated. When questioned during the interview portion of the audit, the MP Investigator and the Commander confirmed that this is the standard of determination in sexual abuse allegation cases.

Standard 115.73 Reporting to inmates

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

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

NWJRCF Policy# 43-16 requires that following an investigation into a prisoner's allegation that he or she suffered sexual abuse in the NWJRCF, the NWJRCF shall inform the prisoner as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Reporting to inmates was not consistently conducted. During the site visit the auditor found a couple instances where the facility could not substantiate this notification.

For three months following the site visitor the auditor requested the facility provide documentation supporting this notification. The facility provided the required documents demonstrating prisoner notifications.

Standard 115.76 Disciplinary sanctions for staff

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

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

Army Corrections Command Policy Letter #35 and NWJRCF Policy Letter #29-16 indicate that termination is the presumptive penalty for violating the sexual abuse policy at the NWJRCF. For civilians, this means removal from federal employment and for military staff it means processing them out of the service through court martial. Sexual harassment penalties are commensurate with the nature and circumstances of the incident. During the interview with the Commander, he confirmed this policy and practice. There have been no terminations or military separations at the NWJRCF during the last 12 months.

Standard 115.77 Corrective action for contractors and volunteers

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

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

Contractors or volunteers who engage in sexual abuse are prohibited from contact with any prisoners at the NWJRCF and are reported to law enforcement agencies, and to relevant licensing bodies. This practice is mandated by Army Corrections Command Policy Letter #35 and NWJRCF Policy Letter #43-16. There has been no contractor or volunteer who violated the sexual abuse policy within the last 12 months.

Standard 115.78 Disciplinary sanctions for inmates

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

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

When there is an administrative finding that a prisoner engaged in sexual activity with another prisoner he/she is subject to disciplinary actions as outlined in Army Corrections Command (ACC) Policy Letter #35 and NWJRCF Policy Letter #43-16. Sanctions are commensurate with the nature and circumstances of the abuse committed taking into account whether mental disabilities contributed. The policy and practice was confirmed with the Commander during his interview.

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

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

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

When a prisoner indicates during the intake process or during his/her risk assessment that he/she experienced prior sexual victimization, whether it occurred in an institutional setting or in the community; or if he/she indicates he/she perpetrated abuse in a facility or in the community, the prisoner is offered a follow-up meeting with a medical or mental health practitioner within 14 days of his/her intake screening. This policy (Army Corrections Command (ACC) Policy Letter #35 and NJRCF Policy Letter #43-16) requirement was confirmed during the interviews with the Behavioral Health Supervisor and the intake/risk assessment staff person. The practice was confirmed after the auditor interviewed two prisoners alleging prior victimization. Both confirmed they were offered treatment services within the first two weeks of arrival.

Standard 115.82 Access to emergency medical and mental health services

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

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

Prisoner victims of sexual abuse at NJRCF receive timely, unimpeded access to emergency medical treatment and crisis intervention services at Madigan Medical Center. Medical and Mental Health practitioners determine the nature and scope of such services according to their professional judgment. The prisoner receives immediate access to sexually transmitted infection prophylaxis and to emergency contraception information and services incurring no cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was confirmed during interview with medical practitioners and behavioral health staff.

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

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

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

Army Corrections Command Policy Letter #35 and NJRCF Policy Letter #29-16 require NJRCF offer medical and mental health evaluation to all prisoners who have been victimized by sexual abuse. The evaluation and treatment include, follow-up services, treatment plans, and referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Prisoner victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests as well as timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. These policies further require prisoners victims of sexual abuse be offered tests for sexually transmitted infections as medically appropriate. The auditor confirmed adherence with this policy requirements with the medical staff.

Standard 115.86 Sexual abuse incident reviews

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

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

Sexual abuse incident reviews were not consistently conducted timely. The auditor interviewed staff who are on the incident review committee and they were knowledgeable of the process. The corrective action plan was for the NJRRCF to provide the auditor all the sexual abuse incident reviews from August till the middle of November (to include the one pending). The NJRRCF provided copies of incident reviews conducted since the on-site audit to include the one case that was pending which demonstrated incident reviews are now consistently conducted on PREA cases. The incident reviews take into consideration all elements of the standard.

Standard 115.87 Data collection

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

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

The Army Corrections Command collects uniform data for every allegation of sexual abuse and sexual harassment from all of the Army operated correctional facilities using the DoJ Survey of Sexual Violence submitted annually. NJRRCF specific data is aggregated to produce both the most recent version of the Survey of Sexual Violence conducted by the Department of Justice and the ACC annual report. The NJRRCF maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The PREA Compliance Manager confirmed this practice during his interview and provided documentation of this collection.

Standard 115.88 Data review for corrective action

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

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

The NWJRCF provides statistical data to Army Corrections Command (ACC) upon request. These statistics are based on the calendar year and is collected and aggregated in order to assess and improve the effectiveness of the facility's sexual abuse prevention, detection, and response policies, practices, and training. The auditor did verify the agency's reports for years 2014 and 2015 was available to the public through the Army website.

Standard 115.89 Data storage, publication, and destruction

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

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

The Army Corrections Command Policy Letter #35 requires all aggregated sexual abuse data, from facilities under its direct control readily available to the public at least annually through its website. The auditor did find this information on the Army web page. The PREA Coordinator and the PREA Compliance Manager indicated during their interviews that they strictly control data that is collected. The facility compliance manager is also required to maintain sexual abuse data (to include, incident reports, investigative reports, offender information, case disposition, and evaluation finding) collected for at least 10 years after the date of the initial collection unless legally required otherwise. All staff and departments will forward any and all PREA related documentation and sexual abuse data to the PREA Compliance Manager for file, archive, and audit.

AUDITOR CERTIFICATION

I certify that:

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

Thomas Eisenschmidt
Auditor Signature

November 10, 2016
Date