

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

Interim       Final

**Date of Report**    December 5, 2017

### Auditor Information

<b>Name:</b> Thomas Eisenschmidt	<b>Email:</b> Tome8689@yahoo.com
<b>Company Name:</b> Click or tap here to enter text.	
<b>Mailing Address:</b> 26 Waterford Lane	<b>City, State, Zip:</b> Auburn, New York 13021
<b>Telephone:</b> 315-730-7980	<b>Date of Facility Visit:</b> June 27-29, 2017

### Agency Information

<b>Name of Agency:</b> Army Corrections Command		<b>Governing Authority or Parent Agency (If Applicable):</b> United States Army	
<b>Physical Address:</b> 2530 Crystal Drive		<b>City, State, Zip:</b> Arlington, VA 22202-3934	
<b>Mailing Address:</b> 150 Pentagon		<b>City, State, Zip:</b> Washington, DC, 20310-0150	
<b>Telephone:</b> 703-545-5920		<b>Is Agency accredited by any organization?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>The Agency Is:</b>		<input checked="" type="checkbox"/> Military	<input type="checkbox"/> Private for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input checked="" type="checkbox"/> Federal
<b>Agency mission:</b> Click or tap here to enter text.			
<b>Agency Website with PREA Information:</b> <a href="https://www.army.mil/">https://www.army.mil/</a>			

### Agency Chief Executive Officer

<b>Name:</b> COL Brian Bisacre	<b>Title:</b> ACC Commander
<b>Email:</b> brian.r.bisacre.mil@mail.mil	<b>Telephone:</b> 703-545-5294

### Agency-Wide PREA Coordinator

<b>Name:</b> Larry Kester	<b>Title:</b> Correctional Program Specialist
---------------------------	---

<b>Email:</b> larry.j.kester.civ@mail.mil	<b>Telephone:</b> 703-545-5920
<b>PREA Coordinator Reports to:</b> Mr. Gregory Stroebel	<b>Number of Compliance Managers who report to the PREA Coordinator</b> 3

**Facility Information**

<b>Name of Facility:</b>	Unites States Disciplinary Barracks		
<b>Physical Address:</b>	1301 N. Warehouse Rd., Fort Leavenworth, KS 66027-2304		
<b>Mailing Address (if different than above):</b>	Click or tap here to enter text.		
<b>Telephone Number:</b>	913-758-3602		
<b>The Facility Is:</b>	<input checked="" type="checkbox"/> Military	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	

**Facility Mission:** Incarcerate U.S. Military prisoners sentenced to long terms of confinement. Conduct correctional and treatment programs to maintain good order and discipline and to prepare prisoners for release as civilians or for return to duty with the prospect of being productive Service Members. On order, conduct execution of condemned U.S. Military prisoners.

**Facility Website with PREA Information:** The USDB does not maintain a public website

**Warden/Superintendent**

<b>Name:</b> COL Dawn L. Hilton	<b>Title:</b> Commandant
<b>Email:</b> DawnLHilton.mil@mail.mil	<b>Telephone:</b> 913-758-3602

**Facility PREA Compliance Manager**

<b>Name:</b> Theresa A. Grenier	<b>Title:</b> Correctional Program Specialist
<b>Email:</b> theresa.a.grenier4.civ@mail.mil	<b>Telephone:</b> 913-758-3984

**Facility Health Service Administrator**

<b>Name:</b> COL Gregory C. Wilson	<b>Title:</b> Director, Treatment Programs
<b>Email:</b> gregory.c.wilson24.mil@mail.mil	<b>Telephone:</b> 913758-3751

**Facility Characteristics**

Designated Facility Capacity: 515		Current Population of Facility: 410	
Number of inmates admitted to facility during the past 12 months			51
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			51
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			51
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			151
Age Range of Population:	Youthful Inmates Under 18: 0	Adults 22-62	
Are youthful inmates housed separately from the adult population?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Number of youthful inmates housed at this facility during the past 12 months:			0
Average length of stay or time under supervision:			24.3 years
Facility security level/inmate custody levels:			Maximum
Number of staff currently employed by the facility who may have contact with inmates:			617 (509 Military & 108 Civilian)
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			272 (263 Military & 9 Civilian)
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			6
<b>Physical Plant</b>			
Number of Buildings: 12		Number of Single Cell Housing Units: 12	
Number of Multiple Occupancy Cell Housing Units:		1	
Number of Open Bay/Dorm Housing Units:		3 Trusty	
Number of Segregation Cells (Administrative and Disciplinary):		95	
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.):			
Click or tap here to enter text.			
<b>Medical</b>			
Type of Medical Facility:		none	
Forensic sexual assault medical exams are conducted at:		Primary: Saint Luke's Cushing Hospital, Leavenworth KS	
<b>Other</b>			
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:			102

<b>Number of investigators the agency currently employs to investigate allegations of sexual abuse:</b>	<b>5</b>
---	----------

# 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.*

The Prison Rape Elimination Act (PREA) audit of the Army United States Disciplinary Barracks (USDB) was conducted on June 27-29, 2017 by Auditor Thomas Eisenschmidt. The auditor received the PREA Pre-Audit Questionnaire, folders for the 43 standards and their supporting documents from the facility five weeks prior to the audit. The auditor reviewed this documentation prior to his arrival.

This was the second PREA audit for the USDB. The entrance briefing for the PREA audit was held on June 27, 2017 with COL Dawn L. Hilton, Commandant, CSM Jeffrey P. Cereghino, Command Sergeant Major, Mr. Thomas J. Schmitt, Deputy Commandant, Mr. Peter J. Grande, Chief of Staff, Mr. Larry J. Kester, PREA Coordinator, Army Corrections Command, LTC Kevin M. Payne, Director, Operations, LTC Gregory C. Wilson, Director, Treatment Programs, LTC Janine P. Felsman, Command Judge Advocate, LTC Edward H. Franklin III, Director, Pastoral Care, MAJ Robert W. Green, Executive Officer, 40th MP Battalion, SGM Veronica E. Knapp, Command Sergeant Major, 40th MP Battalion, SGM Phillip A. Dietz, Sergeant Major, Operations, Dr. Ellen H. Galloway, Chief Mental Health Division, Treatment Programs, Mr. John D. Snyder, Director, Institutional Services, Mr. Johnnie Jones III, Director, Inmate Administration, Mr. Anthony Mendez, Deputy Director, Operations, Mr. Stephen J. Hansen, Deputy Director, Correctional Programs, Mr. Stephen L. Harms, Deputy Command Judge Advocate, Ms. Theresa A. Grenier, PREA Compliance Manager, USDB, Mr. William M. Foster, PREA Compliance Manager, MWJRCF, Ms. Patricia A. Weishaar, Resource Manager, Resource & Policy Management in attendance. The auditor gave a brief overview of the audit process and once it was completed the interview portion of the review began.

A list of random inmates from each of the housing units (36 inmates), inmates disclosing prior victimization (10), inmates identifying as LGBTI (11) were seen. Forty-eight (48) inmate interviews were conducted while on site. The auditor also received four letters from inmates prior to arrival and they were also interviewed. Two (as noted in standard 115.15) dealt with incidental viewing. One dealt with cameras in the inmate visiting process area and the last letter dealt with a PREA investigation. The camera in the visiting process area is only operational during visit times and is only monitored by male staff. The investigation complaint was thoroughly investigated and the auditor could not find an issue based on the facts and evidence in the case.

Once the inmate interviews were completed the specialized staff interviews were conducted. They included the following staff: Agency Director, PREA Coordinator, Health Care, Human Resources, Mid-Level Supervisor (3), Intake Staff Orientation (2), Risk of Victimization Assessment (2), Mental Health Administrator, Restricted Housing Supervisor and Line Staff, Retaliation Monitor, Victim Support Person, Incident Review Team Member, PREA Manager, Facility Investigator, CID Investigator and the Deputy Commandant.

There were ten (10) PREA investigations conducted at the USDB during the last 12 months. Eight (8) sexual abuse cases were investigated by CID and two (2) sexual harassment allegations were administrative investigations conducted by the facility. Of the eight (8) sexual abuse allegations, six (6) allegations involved staff and two (2) allegations involved other inmates. Five (5) of the allegations made against staff were unfounded and the remaining one (1) against a contractor was unfounded. Both of the sexual abuse allegations made against other inmates were unfounded. One (1) of the two (2) sexual harassment investigations during the last 12 month was against a staff member and the other against another inmate. Both allegations were unsubstantiated.

Training records (2015, 2016, and 2017) for staff at the USDB were reviewed. During those calendar years every staff member received the annual PREA training. The auditor also reviewed records for the one time additional training requirements for each Investigator and the Medical and Mental Health.

At the conclusion of the site visit at the USDB the auditor met with CSM Jeffrey P. Cereghino, Command Sergeant Major, Mr. Thomas J. Schmitt, Deputy Commandant, Mr. Larry J. Kester, PREA Coordinator, Army Corrections Command, LTC Kevin M. Payne, Director, Operations, LTC Gregory C. Wilson, Director, Treatment Programs, LTC Clark E. Rabe, Director Pastoral Care (Changed during audit), MAJ Robert W. Green, Executive Officer, 40th MP Battalion, CSM Veronica E. Knapp, Command Sergeant Major, 40th MP Battalion, SGM Phillip A. Dietz, Sergeant Major, Operations, Dr. Ellen H. Galloway, Chief Mental Health Division, Treatment Programs, Mr. John D. Snyder, Director, Institutional Services, Mr. Johnnie Jones III, Director, Inmate Administration, Mr. Anthony Mendez, Deputy Director, Operations, Mr. Stephen L. Harms, Deputy Command Judge Advocate, Ms. Theresa A. Grenier, PREA Compliance Manager, USDB, Mr. William M. Foster, PREA Compliance Manager, MWJRCF, Ms. Patricia A. Weishaar, Resource Manager, Resource & Policy Management and Ms. Chiquita D. Hudson, Director Correctional Programs in attendance. The auditor let those present know that he could not give them a specific outcome but did leave them with some preliminary findings. He thanked everyone for their obvious hard work and asked them to continue their commitment to insure compliance to the Prison Rape Elimination Act.

The USDB is an extremely impressive facility and operation to say the least. It was clear to the auditor the command the facility staff has, everyone from the Commandant to the volunteers, of PREA and their responsibilities to make the facility as safe as it can be. Review of the facility documentation, observations during the tour, interviews with staff and inmates and triangulating this information with the PREA standards confirmed that the USDB staff considers PREA a number one priority and has developed, implemented and are monitoring all of the 43 standards to ensure compliance with their requirements.

## 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 United States Disciplinary Barracks (USDB) is located on Fort Leavenworth, Kansas, approximately 23 miles from Kansas City International Airport, Missouri. Fort Leavenworth overlooks the Missouri River, on the border between Kansas and Missouri and is adjacent to the city of Leavenworth, Kansas on Highway 7.

The USDB is operated by the United States Army and is the only maximum security correctional facility in the Department of Defense. The mission of the USDB is to incarcerate U.S. Military prisoners sentenced to long terms of confinement; conduct correctional and treatment programs to maintain good order and discipline; and to prepare prisoners for release as civilians or for return to duty with the prospect of being productive Soldiers. On order, conduct execution of condemned U.S. Military prisoners. All sections of the USDB are directed toward the achievement of this mission, with particular attention devoted to the individual inmate and administering treatment according to his individual needs.

The facility consists of approximately 37 acres and 12 buildings. The main doors open into the main administrative building. Entrance to the secure area is through a set of double doors operated by Central Control. Once inside the secure area, you see the main hallway of the facility. The first door to the left is the visitation room which contains contact and non-contact areas. The first door to the right in the main hallway contains the offices of the Command Judge Advocate (CJA), Disciplinary and Adjustment Boards (D&A Bds), Air Force, Marine, and Navy Liaisons, and the parole staff. Continuing down the main hallway the offices of the Directorate of Treatment Programs (DTP) is on the right. Numerous single person offices are provided to maintain privacy when staff counsel inmates.

The Special Housing Unit (SHU) can be found on the left side of the main hallway. The SHU is divided into sub-units. SHU East contains four distinct housing units: Death Sentence Inmates; Special Quarters; and two Maximum Custody areas. SHU West contains three distinct housing units: Maximum Custody, Protective Custody and Reception areas. The Reception area is the only housing unit in the facility with double bunk cells. SHU East and SHU West are separated by secure doors which lead to the outside SHU exercise area.

The next area to the right in the main hallway is the Health and Dental Clinics. The Directorate of Pastoral Care (DPC) is located down a short hallway on the left. The Academic section and Library is located in the next hallway to the left. Back in the main hallway the gymnasium, weight room and music room are located on the right.

Having reached the end of the main hallway, a hallway extends to the left and to the right. The hallway to the left leads to the vocational/industry shops and the loading dock at the rear of the facility. The hallway to the right leads to the Dining Facility (DFAC), Craft Shop and access to the general population housing units.

There are three general population housing units. Each is designed as a bowtie. The bowtie is divided into two housing units separated by an enclosed control center. Rooms are available for group meetings and administrative offices.

The Trusty Unit (TU) is located approximately one and one quarter miles southeast of the facility. Inmates assigned to this unit are housed in a two-story structure with open bays divided into individual sleeping areas. One bay in the housing unit contains exercise equipment and a library. The administrative building at the TU contains visitation, barber services and the administrative staff area.

## 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:** 7

**Number of Standards Met:** 36

**Number of Standards Not Met:** 0

## Summary of Corrective Action (if any)

115.51 During the corrective action period the USDB reaffirmed to staff and inmates the private/public reporting mechanism to be used by inmates when reporting a confidential allegation of sexual abuse. The policy and practice requires the inmate to write to the Army Review Boards Agency. This correspondence is treated as privileged mail with that office immediately notifying the Commandant of the allegation upon receipt. The USDB, provided to the auditor recent staff training documentation detailing the facilities’ only reporting means should the inmate wish to make an allegation to a private entity not associated with the institution. Posters were placed on each of the housing units informing the inmates of this reporting procedure and the Commandant reaffirmed the procedure in an article published in the inmate newspaper

115.67 Retaliation monitoring was completed on everyone and for the 90 days as required. The Behavioral Health Case Manager however is required to personally meet with the inmate and in a few instances this was not done. During the corrective action period the facility documented the retraining for all staff required to monitor retaliation. This training reaffirmed the established policy that staff must meet personally with the inmate during the monitoring period. The facility also created a new form to track monitoring and alleviate the chance anyone may not be seen.

## PREVENTION PLANNING

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

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

#### 115.11 (a)

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

#### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  
 Yes  No

#### 115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)  Yes  No  NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)  Yes  No  NA

### Auditor Overall Compliance Determination

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



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

### **Instructions for Overall Compliance Determination Narrative**

*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 United States Disciplinary Barracks (USDB) main PREA Policies consist of the Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA), dated 11 Sep 2014, 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act, dated 28 Sep 2014, 15th Military Police Brigade Regulation 190-3, Rules of Conduct, dated 7 Jun 2016 and United States Disciplinary Barracks (USDB) Regulation 600-1, Manual for the Guidance of Inmates, dated 25 Jul 2016. The auditor reviewed and confirmed that these policies are in place and enforced ensuring the USDB has direction mandating zero tolerance toward all forms of sexual abuse and sexual harassment. These policies outline their approach to preventing, detecting, and responding to all forms of such conduct. These policies also include definitions of prohibited acts regarding sexual assault and sexual harassment of inmates with sanctions for those found to have participated in prohibited behaviors. Throughout the USDB the auditor observed PREA posters affirming the zero tolerance policy toward all forms of sexual abuse and sexual harassment along with the inclusion of contact information (phone numbers and addresses).

Mr. Gregory Stroebel is the Director of the Army Corrections Command.

Mr. Larry Kester is the Correctional Program Specialist and is the agency's PREA Coordinator. He has direct access to the Director and has the authority to manage the agency's PREA Program. Larry supervises three (3) institutional PREA Compliance Managers, who report to him directly. Agency updates and changes are forwarded from his office to each of his institutions and staff. Mr. Kester was present during the audit site visit.

Theresa Grenier is the PREA Compliance Manager at the USDB and a certified PREA auditor. Ms. Grenier is extremely confident and knowledgeable with the USDB PREA policies, the PREA standards and the PREA process. She was definitely an asset to this auditor prior, during and after the site visit. During her interview she confirmed she has sufficient time to perform her PREA duties along with her other responsibilities. She also indicated she has direct access to the PREA Coordinator for any questions or suggestions. The inmates and staff at the USDB were well aware of her position as the point of contact for any questions, concerns, reporting or information relating to PREA. The position of PREA Manager is found on the facility Organizational Chart and reports directly to the Deputy Commandant.

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

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

#### **115.12 (a)**

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's

obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  Yes  No  NA

#### 115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)  Yes  No  NA

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*The 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 USDB does not contract with other entities for the confinement of inmates.

#### Standard 115.13: Supervision and monitoring

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

#### 115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally

accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?  Yes  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?  Yes  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?  Yes  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?  Yes  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?  Yes  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?  Yes  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?  Yes  No  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?  Yes  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?  Yes  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?  Yes  No

### 115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  
 Yes  No  NA

### 115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?  Yes  No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?  Yes  No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?  Yes  No

### 115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?  Yes  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?  Yes  No

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*The 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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) requires each facility develop a posting requirement plan (Staffing Plan). This plan must take into consideration generally accepted detention and correctional practices, any judicial findings of inadequacy, any findings of inadequacy from Federal investigative agencies, any findings of inadequacy from internal or external oversight bodies, all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated), the composition of the inmate population, the number and placement of supervisory staff, institution programs occurring on a particular shift, any applicable Federal State or local laws, regulations, or standards, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors.

The Deputy Commandant confirmed during his interview that the USDB utilizes those above noted considerations and further stated that he and/or the Commandant must be notified when there is any deviation from this plan. Deviations must be annotated with the reason for it in the blotter document reviewed each day by the facility Command. He also indicated that the USDB staffing plan is reviewed and assessed annually, with the assessment documented and available for review. The auditor did review the annual assessments done for years 2014, 2015 and 2016. After each annual review the report is discussed with Mr. Kester, PREA Coordinator and then forwarded to the ACC Director with any recommendations or comments.

Military Correctional Complex (MCC) Regulation 210-1, Staff Duty/Authentication Officer, dated 24 Jun 2014, requires the Staff Duty Officer (SDO) to conduct regular and random unannounced rounds to identify and deter staff and inmate sexual misconduct. The supervisory staff indicated during their interviews that their unannounced rounds are accomplished by staggering the round times and locations so staff do not become aware of when they are conducting them. The auditor found supervisor signatures in logs during the tour.

## Standard 115.14: Youthful inmates

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

#### 115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### 115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### 115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].)  
 Yes  No  NA

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) outlines the action to be taken should a youthful offender be remanded to the custody of the ACC. The USDB would not house youthful inmates at their facility. In the very rare circumstance where a 17 year old enters pretrial confinement, the Soldier would be housed at the Midwest Joint Regional Correctional Facility (MWJRCF). If this Soldier is found guilty of a crime with a long sentence length, he would remain at the MWJRCF until he attained the age of 18

## Standard 115.15: Limits to cross-gender viewing and searches

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

#### 115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?  
 Yes  No

#### 115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)  Yes  No  NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.)  Yes  No  NA

#### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates?  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?  Yes  No

#### 115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  Yes  No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?  Yes  No

#### 115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No

## Auditor Overall Compliance Determination

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

## Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) prohibits staff at the USDB from conducting cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal/genital opening) except in exigent circumstances to ensure safety or to preserve evidence or when performed by a medical practitioner. Any cross-gender strip searches shall be annotated on the facility form DD 2713 and filed with the Watch Commander. There were zero cross-gender searches or cross-gender visual body cavity searches conducted at the USDB during the last thirty-six (36) months. Interviews with staff confirmed they do not conduct cross-gender strip searches or cross-gender visual body cavity searches. The random inmate interviews disclosed that they had not had cross gender strip searches conducted on them.

This same policy requires facility staff shall enable inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia. Facility staff of the opposite gender is also required by this policy to announce their presence when entering an inmate housing unit. During the time the auditor was present, he observed female staff verbally announced their presence when entering the male inmate living areas. The inmate interviews confirmed that this announcement requirement was being done. The auditor did receive two letters from inmates questioning privacy concerns that they had when using the toilet in their cells. The same concern was voiced during the random inmate interviews as well. In the past some staff had allowed inmates to place a covering in the small glass area in their cell door window, in violation of the facility rules, while they used the toilet. Because of security and well-being concerns the facility was enforcing the rule prohibiting this. These privacy concerns raised by the inmates centered around "incidental" viewing by both male and female staff during count times and rounds. The auditor did try to clarify the confusion with these inmates.

The Special Housing Unit has one wing designated for inmates with a death sentence (DSI) and wings designated for discipline and administrative housing. All of the cells within the DSI unit and one cell (observation) on each of the other restricted housing units have a camera that sees the entire cell including the toilet. These cameras are only activated for suicide watch and viewed by members of the same gender as the inmate.

Training records for 2015, 2016 and 2017 indicated all staff have received training on conducting cross-gender pat-down searches of transgender and intersex inmates in a professional and respectful manner, and never for the purpose of determining genitalia status. The random staff interviewed at the USDB indicated this policy mandate was presented to them during their training. Transgender inmate interviews (2) confirmed each felt that they have been treated with respect during frisk procedures and indicated they felt they were never searched for the purpose of determining their genital status.

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



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

### 115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)?  Yes  No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  Yes  No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?  Yes  No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision?  Yes  No

#### 115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?  Yes  No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No

#### 115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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.*

Army Corrections Command (ACC) does not house any inmates that are not able to read, write and understand English. Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) requires each facility take appropriate steps to ensure that inmates with limited English or disabilities (inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The USDB does have a

Telecommunication Device for the deaf should they need one. The random staff interviews confirmed that inmates couldn't be used for interpretation in sexual abuse allegations except for emergency situations.

The auditor discussed the intake process performed on new arrivals at the USDB with an intake staff member. Each inmate upon arrival receives a PREA overview informing them of their right to be free from sexual abuse/harassment, how to report it if they are, and informing them that they will not be punished for reporting it. Inmates receive a thorough orientation within the first week of arrival of all rules and another overview of the PREA law. All of the inmates that the auditor interviewed confirmed receiving this PREA orientation including those who arrived at the USDB prior to 2013.

## Standard 115.17: Hiring and promotion decisions

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

#### 115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No

#### 115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, 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 employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?  Yes  No

#### 115.17 (d)

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

#### 115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  Yes  No

#### 115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?  Yes  No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?  Yes  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

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

#### 115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on

substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)  Yes  No  NA

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) policy require each ACC facility complete a thorough background check through National Crime Information Center (NCIC) on all Soldiers and civilians entering into any of their institutions. This same policy requires Human Resource Staff to ask new hire applicants who may have contact with inmates whether he/she was ever convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse or been civilly or administratively adjudicated to have engaged in the activity, engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, overt or implied threats of force, or coercion. An affirmative response to any of these questions by an applicant prohibits the USDB from employing this individual.

Information on substantiated allegations of sexual abuse involving any former civilian or Soldier at the USDB upon receiving a request from an institutional employer for whom such employee has applied to work is forwarded to ACC (Central Office) for processing. The information requested will be forwarded if not prohibited by law.

15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires that all staff, contractors, and volunteers background rechecks be done every five (5) years. Each of these individuals is issued an ID badge on the day of his/her background check is completed and approved. It expires five (5) years from that date of issue. The NCIC report confirmed that as of May 2017 all background checks were currently up-to-date.

Annually each Soldier and civilian is required to read and sign the PREA Disclosure Statement that acknowledges that he/she has not engaged in any sexual misconduct.

## Standard 115.18: Upgrades to facilities and technologies

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

#### 115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A)

if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)   
Yes  No  NA

### 115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 USDB has had no substantial expansion or modifications to its physical plant over the last three years. There are currently 229 cameras at the institution. The facility added 45 in the last 12 months and is the process of upgrading and increasing more. The PREA Compliance Manager is involved in the placement locations of all new cameras and this was confirmed during her interview and the interviews with the Director and the Deputy Commandant. The auditor reviewed the locations of the camera and monitored what each camera is able to view from the facility Control Center and the Military Police Investigators offices. There were no privacy concerns associated with any of the cameras positioned at the facility.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

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

#### 115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  
 Yes  No  NA

#### 115.21 (b)

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

#### 115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?  Yes  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  Yes  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

#### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?  Yes  No

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

#### 115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?  Yes  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

#### 115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating 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.)  Yes  No  NA

#### 115.21 (g)

- Auditor is not required to audit this provision.

#### 115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.]  Yes  No  NA

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*The 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.*



Investigators at the USDB and Investigators from the Criminal Investigation Command (CID) must adhere to investigation and evidence protocols 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. CID Investigators have the legal authority to conduct criminal investigations within ACC facilities based on a Memorandum of Agreement (MOA) dated 2014 with no sunset date.

Investigative Training for the four facility Investigators and the CID investigator included a course from the National Institute of Correction (NIC), " PREA: Investigating Sexual Abuse in Confinement Settings". The subject matter of this course included protocols from the recent edition of DOJ "National Protocol for Sexual Assault Medical Forensic Examinations." The training is documented in each of the training records of the facility Investigators. The interview conducted with one of them, during the site visit, detailed this training including the requirement he follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions.

The auditor interviewed \*\*\*\*\*. He indicated that he had received specialized sexual abuse training for confinement settings. The training included protocols from the recent edition of DOJ "National Protocol for Sexual Assault Medical Forensic Examinations." He also indicated he follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions.

St. Luke Cushing Medical Center is the hospital inmates from the USDB are sent to for a forensic exam if necessary. The examinations are conducted at no expense to the inmate, by a Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) whenever possible. If a SAFE or SANE nurse is not available, the examination is performed by other qualified medical practitioner. The USDB did not send any inmates out for a forensic exam in the last 36 months.

Anytime staff at the USDB become aware of a sexual assault he/she must immediately notify the Sexual Assault Prevention and Response Coordinator (SARC) of the incident. This individual is a base (community) Support Services Supervisor. The SARC ensures a trained staff member from the office accompanies the victim through the forensic medical exam process and investigatory interviews. Victims of sexual assault may also request emotional support services, crisis intervention, information and referrals anonymously via the Safe Help Line phone number and address posted on each of the housing Units and throughout the facility. This Safe Help Line number is directed to Rape Abuse & Incest National Network which is a support service agency contracted by the Department of Defense (DoD). They provide free and confidential services, educates the public about sexual violence, and leads national efforts to end sexual violence, improve services to victims of sexual violence and ensure that rapists are brought to justice.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

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

#### **115.22 (a)**

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

#### **115.22 (b)**

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to

conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?  Yes  No

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

#### 115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).]  Yes  No  NA

#### 115.22 (d)

- Auditor is not required to audit this provision.

#### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) policy, requires all allegations of sexual misconduct, regardless of severity or merit, be immediately reported to the CID. As previously noted CID, a separate agency from ACC, has the legal authority and responsibility to conduct all criminal investigations. This investigative unit receives all allegations of sexual abuse alleged to have occurred within the USDB. If CID determines the accusation is not a criminal the case it is returned to the facility for an administrative investigation. ACC publishes their investigative policy on its website (<http://www.army.mil/opmg>).

Interviews were conducted with one of the facility trained Investigators and an Investigator from CID. Both confirmed that an investigation is required and completed on each allegation of sexual abuse or sexual harassment alleged to have occurred at the USDB.

There were ten (10) PREA investigations conducted at the USDB during the last 12 months. Eight (8) sexual abuse cases were investigated by CID and two (2) sexual harassment allegations were administrative investigations conducted by the facility. Of the eight (8) sexual abuse allegations, six (6) allegations involved staff and two (2) allegations involved other inmates. Five (5) of the allegations made against staff were unfounded and the remaining one (1) against a contractor was unfounded. Both of the sexual abuse allegations made against other inmates were unfounded. One (1) of the two (2) sexual harassment investigations during the last 12 month was against a staff member and the other against another inmate. Both allegations were unsubstantiated.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

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

#### 115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  Yes  No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Yes  No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?  Yes  No

- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  
 Yes  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  Yes  No

#### 115.31 (c)

- Have all current employees who may have contact with inmates received such training?  
 Yes  No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?  Yes  No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  Yes  No

#### 115.31 (d)

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

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) policy requires each Soldier and civilian receive instruction on the agency zero tolerance policy; the agency policy and

procedures for prevention; reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting; common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Training also includes the proper search techniques to perform when conducting pat down searches on transgender and intersex inmates. No staff member is allowed to work at the USDB without first receiving pre-service information included in the pre-service curriculum. The random staff interviews conducted and the general questions asked during the tour confirmed staff members are very knowledgeable on their responsibilities in detecting, reporting, and responding to sexual abuse and sexual harassment.

Staff is also provided PREA training annually. Everyone must take it, no exceptions. Documentation at the USDB demonstrated this compliance for everyone currently working at the facility for 2017. They provided completed PREA training for years 2015, 2016 and 2017 for all staff that worked there as well.

## Standard 115.32: Volunteer and contractor training

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

#### 115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?  Yes  No

#### 115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?  Yes  No

#### 115.32 (c)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 USDB puts the same emphasis on training contractors and volunteers as it does with Soldiers and civilians. The Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires all volunteers and contractors who have contact with inmates be trained on their responsibilities under the facility's sexual misconduct prevention, detection, and response policies and procedures.

The auditor reviewed the training curriculum and training records for these individuals for years 2015, 2016 and 2017. Contractors and volunteers at the USDB sign documents indicating each has received the PREA training and understands the agency zero tolerance policy.

Interviews conducted on site with one contractor and two volunteers confirmed the training each received and the document each signs indicating their understanding of the training and agency policy.

## **Standard 115.33: Inmate education**

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

#### **115.33 (a)**

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

#### **115.33 (b)**

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  Yes  No

#### **115.33 (c)**

- Have all inmates received such education?  Yes  No

- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  Yes  No

#### 115.33 (d)

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

#### 115.33 (e)

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

#### 115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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.*

Inmate education, related to PREA begins at the USDB on the day of the inmates' arrival. The 15th Military Police Brigade Regulation 1-2, (Prison Rape Elimination Act) policy requires each new arriving inmate receive an initial brief on the USDB zero tolerance policy and are given the MCC form 307-3 (Sexual Harassment and Sexual Abuse Prevention Handout) informing them of their right to be free from sexual misconduct, right to be free from retaliation for reporting such incidents, and information regarding facility policies and procedures for responding to such incidents.

The Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act policy requires within 30 days each inmate arriving at the USDB receive a more comprehensive education including video and classroom instructions. This information includes a question and answer period about PREA as well.

Random inmate interviews and informal discussions with inmates during the facility tour, indicated they received PREA information upon arrival at the facility, it is reinforced daily through staff interaction, and through informational postings in the housing units and common areas.

## **Standard 115.34: Specialized training: Investigations**

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

#### **115.34 (a)**

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators 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).]  Yes  No  NA

#### **115.34 (b)**

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



### 115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  
 Yes  No  NA

### 115.34 (d)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) policy require that in addition to the general training provided to all civilians and Soldiers at the USDB, the facility must ensure that each of its Investigators receive additional training in conducting sexual abuse investigations in confinement settings. Each of the Investigators participated and successfully completed the National PREA Resource Center Curricula, developed by the Moss Group, titled "Investigating Sexual Abuse in Confinement Settings".

The subject matter for this training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Interviews with one of the facility Investigators and the CID Investigator confirmed that they received training specific to conducting sexual abuse investigations and the curriculum noted above.

## Standard 115.35: Specialized training: Medical and mental health care

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

### 115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?  Yes  No

#### 115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)  Yes  No  NA

#### 115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?  Yes  No

#### 115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?  Yes  No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*The 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.*

MCC Regulation 350-1 requires all medical and mental health care practitioners, full and part-time who work regularly in the facility receive the mandated training including at a minimum how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and whom to report all allegations or suspicions of sexual abuse and sexual harassment.

The auditor reviewed training documentation for medical and mental health staff confirming all current staff have received this one time training. Interviews conducted with medical and mental health practitioners confirmed that they have received this additional specialized training as well.

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

### **Standard 115.41: Screening for risk of victimization and abusiveness**

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

#### **115.41 (a)**

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  Yes  No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  Yes  No

#### **115.41 (b)**

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

#### **115.41 (c)**

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

#### **115.41 (d)**

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?  Yes  No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?  Yes  No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?  Yes  No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?  
 Yes  No

#### 115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?  Yes  No

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral?  
 Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Request?  
 Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?  Yes  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?  
 Yes  No

#### 115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?  Yes  No

#### 115.41 (i)

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

#### Auditor Overall Compliance Determination

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

## Instructions for Overall Compliance Determination Narrative

*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.*

Every inmate that arrives at the USDB receives a screening for his risk of victimization and abusiveness. This initial risk assessment is performed within two hours of his arrival by a trained staff member for their vulnerability or abusiveness. The staff member begins the assessment by asking the inmate: 1) if he has a mental, physical, or developmental disability, (2) his age, (3) the physical build of the inmate, (4) whether the inmate has previously been incarcerated, (5) whether the inmate's criminal history is exclusively nonviolent, (6) whether the inmate has prior convictions for sex offenses against an adult or child, (7) whether the inmate is or is perceived to be gay, bisexual, transgender, intersex, or gender nonconforming, (8) whether the inmate has previously experienced sexual victimization, (9) the inmates' own perception of vulnerability, and (10) whether the inmate is detained solely for civil immigration purposes. The staff member also determines if the inmate is perceived to be gender non-conforming. Any inmate who may be at risk based on this screening is immediately sent to a mental health practitioner and or medical staff person. This screening for sexual abusiveness and sexual victimization and is routinely performed on arrival but no longer than 24 hours from the date of arrival. A second risk assessment is completed by Clinical Services within 21 days of his arrival.

Interviews with the screening staff, Directorate of Treatment Programs (DTP) staff, and Clinical staff confirm the policy is followed to ensure each inmates' risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmates risk of sexual victimization or abusiveness.

Interviews confirmed inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked about: whether the inmate has a mental, physical, or developmental disability; whether the inmate is or is perceived to be gay, bisexual, transgender, intersex, or gender nonconforming; whether the inmate has previously experienced sexual victimization; and the inmate's own perception of vulnerability.

Information obtained during this screening process is shared with appropriate staff (medical, mental health, and supervisors) as needed to make housing, bed, work, education, program assignments and mental health and medical referral

## Standard 115.42: Use of screening information

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

#### 115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?  Yes  No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?  Yes  No

#### 115.42 (b)

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

#### 115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?  Yes  No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?  Yes  No

#### 115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?  Yes  No

#### 115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  Yes  No

#### 115.42 (f)

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

#### 115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  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?  Yes  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?  Yes  No

**Auditor Overall Compliance Determination**

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

**Instructions for Overall Compliance Determination Narrative**

*The 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.*

USDB Regulation 15-3. Initial Classification Board (ICB) policy requires, among other things, that the USDB utilizes the Risk Assessment information as one of the tools when determining an appropriate level of custody for an inmate. The ICB also determines an inmate’s initial housing, treatment, and training and work assignments while taking into consideration vulnerability to sexual victimization or risk to engage in sexually abusive behavior, recreational preferences, and needs of the inmate. The PREA Compliance Manager, Risk Assessment staff and a member of the ICB staff stated in their interviews that all information obtained from the screening during intake is reviewed, assessed and used to determine 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.

The auditor interviewed a total of nine (9) gay/bisexual inmates during the site visit at the USDB and all confirmed that they were never placed on a dedicated housing unit based on their sexual identity. Two (2) transgender inmates were also interviewed and indicated that they were allowed to give input about their safety concerns prior to bed and work assignments being made. All inmates at the USDB are allowed to shower alone in private so this was not an issue for them. USDB Regulation 15-3. Initial Classification Board (ICB) policy requires, among other



things, that the USDB utilizes the Risk Assessment information as one of the tools when determining an appropriate level of custody for an inmate. The ICB also determines an inmate's initial housing, treatment, and training and work assignments while taking into consideration vulnerability to sexual victimization or risk to engage in sexually abusive behavior, recreational preferences, and needs of the inmate. The PREA Compliance Manager, Risk Assessment staff and a member of the ICB staff stated in their interviews that all information obtained from the screening during intake is reviewed, assessed and used to determine 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.

The auditor interviewed a total of nine (9) gay/bisexual inmates during the site visit at the USDB and all confirmed that they were never placed on a dedicated housing unit based on their sexual identity. Two (2) transgender inmates were also interviewed and indicated that they were allowed to give input about their safety concerns prior to bed and work assignments being made. All inmates at the USDB are allowed to shower alone in private so this was not an issue for them.

## Standard 115.43: Protective Custody

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

#### 115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?  Yes  No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  Yes  No

#### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?  Yes  No

- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?  Yes  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?  Yes  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?  Yes  No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?  Yes  No

#### 115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA), dated 11 Sep 2014, 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act, dated 28 Sep 2014, prohibits placing inmates at high risk for victimization at the USDB in involuntary segregated housing unless an assessment of all available alternatives has been made and that there is no available means of separation from a

likely abuser. This policy was confirmed during the interviews with the Deputy Commandant and the Restricted Housing Supervisor.

The Deputy Commandant further stated in his interview that if ever a situation presented itself where an inmate alleging risk of victimization needed to be protected, he would most likely be in another housing unit at the USDB until the inmate could be moved to another ACC facility. There has been no case where segregation was used to place any inmate at high risk of victimization in the last 36 months at the USDB.

The auditor observed and confirmed no inmates were in restricted housing for protection from sexual abuse during his tour of this area.

## 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

##### 115.51 (c)

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

- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  
 Yes  No

#### 115.51 (d)

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

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires inmates at the USDB are provided 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. It also requires the facility provide at least one way for any inmate to report to public/private entity not part of the facility and is able to receive and immediately forward inmate reports to facility allowing the inmate to remain anonymous if he desires.

As previously noted each inmate receives a PREA handout upon arrival, with PREA information, including how to report. There are also posted notifications in every area inmates have access informing them of multiple ways to privately report PREA allegations. Allegations by inmates can be done verbally to staff, in written reports, through anonymous (unsigned) reports and reports from third parties (family members or friends). The random interviews conducted with the inmates at the facility revealed that they were well aware of these reporting venues if needed.

Inmates have two options to report allegations of sexual abuse to them. An unrestricted report, for inmates who desire an official investigation and command notification (institution) in addition to healthcare, victim advocacy, and legal services or the second option which is anonymous reporting. Under this type of reporting inmates desiring to privately disclose the allegation where all information except the identity of the alleged victim is forward to the Commandant.

The 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act policy states inmates can report sexual abuse allegations through the Inspector General and the DoD SAFE Help Line. There are also posters on each of the housing units and posted in inmate common areas informing them to contact the Army Review Boards Agency to make allegations of sexual abuse/sexual harassment. The preferred private entity contact point is through the Army Review Boards Agency. There is some confusion by staff and inmates of the proper means of the private/public entity contact. Largely in part because of the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act and the DoD hotline number phone posted on each of the housing units phones that inmates believe is a reporting number.

Currently, if an inmate makes an allegation through the SAFE Help Line, the call is routed to the on-call staff member at Fort Leavenworth. This could, and did, result in a call be forwarded to a 15th MP Brigade staff member, who happened to be the on-call person at the time, instead of an outside agency. It is clear the SAFE Help Line cannot be used as the outside reporting agency at Fort Leavenworth.

During the corrective action period the USDB reaffirmed to staff and inmates the private/public reporting mechanism to be used by inmates when reporting a confidential allegation of sexual abuse. The policy and practice requires the inmate to write to the Army Review Boards Agency. This correspondence is treated as privileged mail with that office immediately notifying the Commandant of the allegation upon receipt. The USDB, provided to the auditor recent staff training documentation detailing the facilities' only reporting means should the inmate wish to make an allegation to a private entity not associated with the institution. Posters were placed on each of the housing units informing the inmates of this reporting procedure and the Commandant reaffirmed the procedure in an article published in the inmate newspaper.

## 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.)  Yes  No  NA

#### 115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  Yes  No  NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  Yes  No  NA

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  
 Yes  No  NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA

### 115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  Yes  No  NA

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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.*

Policies indicate grievances are not the appropriate process for filing allegations of sexual misconduct. Therefore the USDB is exempt from this standard.

## Standard 115.53: Inmate access to outside confidential support services

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

### 115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?  Yes  No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?  Yes  No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

#### 115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?  Yes  No

#### 115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?  Yes  No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 USDB utilizes the Department of Defense (DoD) SAFE Help Line for emotional support services for victims of sexual abuse/harassment. In May 2010, the DoD Sexual Assault Prevention and Response Office (SAPRO) awarded a contract to the Rape, Abuse & Incest National Network (RAINN) to provide an anonymous online and telephone hotline to allow Service members of the DoD community to seek anonymous one-on-one crisis support securely. The Sexual Harassment Assault Prevention (SHARP) Program plays a vital role in making this Safe Help Line a success. A SHARP Advocate assists victims of sexual assault with the different treatment options available to them and educates them about their rights. SHARP services include developing a safety plan and assessing the victim's medical needs. They also provide information on resources available to them, information on the sexual assault forensic examination, and information on the military disciplinary system. A SHARP advocate is available 24 hours a day 7 days a week either through personal contact or through the DoD hotline. USDB has the phone number to contact posted on each of the living units and posted in inmate common areas as well. The phone number is not monitored or recorded.

## Standard 115.54: Third-party reporting

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

#### 115.54 (a)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires the USDB accept and investigate all allegations of sexual abuse and sexual harassment from third parties on behalf of any inmate. These policies provide numerous means to accomplish this third party contact. Inmates are informed that third party allegations can be made through contacting the facility by phone, through the DoD Safe Help Line, by contacting the Army Reviews Boards Agency, and through information provided on the Army web site [https://www.army.mil/article/188745/army\\_corrections\\_command\\_prison\\_rape\\_elimination\\_act\\_policy](https://www.army.mil/article/188745/army_corrections_command_prison_rape_elimination_act_policy).

Inmate families/friends also receive a "safe arrival letter" from the USDB for each inmate arriving at the USDB. The letter contains information on how and to whom to report any allegation of sexual abuse for an inmate.

Interviews with random staff and inmates demonstrated each were aware of third party reporting. Staff indicated that they are required to put into writing any verbal reports of sexual abuse/harassment that they may receive.

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

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

#### 115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?  Yes  No

#### 115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?  Yes  No

#### 115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?  Yes  No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  Yes  No

#### 115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?  Yes  No

#### 115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires staff members, contractors and volunteers at the USDB to report any knowledge, suspicion, or information regarding incidents of sexual abuse or sexual harassment immediately. This reporting requirement obligates they also report retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation as well.

Interviews conducted with random staff, medical and mental health staff, contractors and volunteers acknowledged their requirement to report any and all information they come upon with respect to sexual abuse. They also indicated that any information they become aware of is not to be reported or repeated to anyone except to a designated supervisors or official.

#### Standard 115.62: Agency protection duties

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

#### 115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?  Yes  No

#### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires that any staff at the USDB becomes aware of information that an inmate may be at substantial risk of sexual abuse they are required to take immediate action to protect the inmate. The auditor questioned random staff and the Deputy Commandant about this specific section of each policy and the standard requirements. Each of them indicated that they would take immediate action to safeguard the inmates' well-being, following the same guidelines as if the inmate was a victim of sexual abuse.

The Deputy Commandant, during his interview, specifically reinforced that restricted housing was not a means of protection he would use when safeguarding any potential victim. He indicated he had movement options within the USDB he could implement including transferring the inmate out of the USDB if necessary.

## Standard 115.63: Reporting to other confinement facilities

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

#### 115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?  Yes  No

#### 115.63 (b)

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

#### 115.63 (c)

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

#### 115.63 (d)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act policies require that the facility upon receiving an allegation that an inmate was the victim of sexual misconduct while confined at another facility, the Commandant is required to notify the head of the facility/agency where the alleged abuse occurred no later than 72 hours after receiving the allegation. The facility has had no cases alleging sexual abuse reported to them by an inmate occurring in other facilities within the last twelve month. Likewise the facility received no calls from other facilities alleging sexual abuse occurring while an inmate was at the USDB.

The PREA Manager and the Deputy Commandant were well aware of the notification requirements of their policies and the standard.

## Standard 115.64: Staff first responder duties

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

#### 115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?  Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth,

changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?  Yes  No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?  Yes  No

#### 115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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.*

Everyone (Civilian, Soldier, Contractor and Volunteer) at the USDB is trained as a first responder for sexual abuse/harassment allegations.

The Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) differentiates the responsibilities between the custody and non-custody staff. The random custody staff members interviews indicated they would: separate the alleged victim and abuser, preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; 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, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

The three non-custody staff (volunteer/contractor) indicated that after securing the alleged victim, they would immediately contact a custody staff person to take charge of the situation. They also stated that they would not let an inmate wash, brush their teeth or talk to anyone until custody staff arrived.

## Standard 115.65: Coordinated response

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

### 115.65 (a)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) requires each of its' facilities develop a written plan that coordinates actions to be taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and the facility Command. This coordinated response plan at the USDB is found in 15th Military Police Brigade Regulation 1-2 Appendix D.

The auditor spoke with medical staff, mental health staff, the facility Investigator and multiple supervisors during the site visit. Each confirmed they were aware of this policy and were knowledgeable of their responsibilities should it become necessary they need to respond to a reported incident of sexual abuse.

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

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

### 115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual

abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

#### 115.66 (b)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 USDB has no collective bargaining unit agreement for civilian employees was updated in 2015. Military staff members are not eligible for membership in a collective bargaining unit. Nothing limits their ability to remove alleged staff sexual abusers from contact with any inmate pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted.

#### Standard 115.67: Agency protection against retaliation

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

#### 115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  Yes  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

#### 115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with



victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?  Yes  No

#### 115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?  Yes  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

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

### 115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?  
 Yes  No

### 115.67 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) requires each of its' facilities develop a written policy to protect inmates and staff who report sexual abuse or cooperate with a sexual abuse investigation from retaliation by other inmates or staff. The 15th Military Police Brigade Regulation 1-2 indicates this is accomplished at the USDB through the Monitoring Retaliation Committee (MRC). The Director of Treatment Programs chairs and coordinates this committee that monitors individual(s) involved in a report of sexual abuse or sexual harassment to prevent and to remediate retaliation secondary to the reported incident. The USDB MRC members consist of the USDB Deputy Commandant, the USDB PREA Compliance Manager, the Director or Deputy Director for the Directorate of Operations, the Directorate of Correctional Programs, the Directorate of Institutional Services, the Directorate of Pastoral Care; Office of the Command Judge Advocate (OCJA) attorney; and Military Police Investigations (MPI). Based on the incident being reviewed, additional members may be added at the discretion of the USDB Deputy Commandant. Additional personnel may include, but is not limited to, the inmate's treatment provider, Housing Unit Noncommissioned Officer (NCO), and/or treating medical personnel. Minutes are taken and kept by the DTP Office Automation Assistant (OAA) and include attendees, topics discussed, recommendations made, and courses of action taken. The chair signs the minutes. The USDB employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual misconduct or for cooperating with investigations. Retaliation is monitored for a minimum of 90 days and it can be extended indefinitely if needed.

The auditor reviewed monitoring conducted on all individuals during the last 12 months. Monitoring was completed on everyone and for the 90 days as required. The Behavioral Health Case Manager however is required to personally meet with the inmate and in a few instances this was not done. During the corrective action period the facility documented the retraining for all staff required to monitor retaliation. This training reaffirmed the established policy that staff must meet personally with the inmate during the monitoring period. The facility also created a new form to track monitoring and alleviate the chance anyone may not be seen.

## Standard 115.68: Post-allegation protective custody

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

### 115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?  Yes  No

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act policies outline when restricted housing may be used for post allegation protective custody. As previously noted in standard 115.43 the use to protect any inmate who alleged to have suffered sexual abuse is prohibited by policy unless an assessment of all available alternatives has been made and a determination has been made that there is no available means of separating a victim from likely abuser. This placement, if ever made, can be no longer than 24 hours.

The policy was confirmed during the interviews with the Deputy Commandant and the Special Housing Unit (SHU) Supervisor. According to them this housing unit has never been used to protect a victim. If it were ever used for this purpose the inmates would have access to: programs, privileges, and education.

The auditor observed and confirmed no inmates were in protective custody for protection from sexual abuse during the tour of the SHU.

## INVESTIGATIONS

## Standard 115.71: Criminal and administrative agency investigations

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

### 115.71 (a)

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

#### 115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  Yes  No

#### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  
 Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

#### 115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?  Yes  No

#### 115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?  Yes  No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?  Yes  No

#### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  Yes  No

#### 115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?  Yes  No

#### 115.71 (h)

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

#### 115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?  Yes  No

#### 115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?  Yes  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 United States Army Criminal Investigations Command (CID) has an MOU with the Army Corrections Command to conduct criminal investigations within the USDB. CID has the legal authority to conduct such criminal investigations. As previously noted all allegations are initially considered criminal until CID makes a determination that the facts/evidence do not support a crime. When this occurs one of the five trained facility Investigators conducts an administrative investigation. The auditor reviewed the training records of all four of the facility investigators and discussed the training received by the CID Investigator. As noted in standard 115.34 each has fulfilled the specialized training requirements.

The facility Investigator and Investigator from CID informed the auditor that the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an inmate or staff member. According to them only the facts and evidence are the determining factor in a case. Both the facility investigator and the CID investigator informed the auditor that truth telling devices are never used for victims as a condition for proceeding with any sexual abuse investigation.

Both discussed the investigative process setting it involved gathering and preserving direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, interviews with alleged victims, suspected perpetrators, and witnesses, and also included reviewing any prior complaints and reports of sexual abuse involving the suspected perpetrator. The departure of the alleged abuser or victim from the employment or control of the facility or service does not provide a basis for terminating any investigation according to them.

The auditor looked at case files for 2014, 2015, 2016 and the last twelve months. There were ten (10) PREA investigations conducted at the USDB during the last 12 months. Eight (8) sexual abuse cases were investigated by CID and two (2) sexual harassment allegations were administrative investigations conducted by the facility. Of the eight (8) sexual abuse allegations, six (6) allegations involved staff and two (2) allegations involved other inmates. Five (5) of the allegations made against staff were unfounded and the remaining one (1) against a contractor was unfounded. Both of the sexual abuse allegations made against other inmates were unfounded. One (1) of the two (2) sexual harassment investigations during the last 12 month was against a staff member and the other against another inmate. Both allegations were unsubstantiated.

## Standard 115.72: Evidentiary standard for administrative investigations

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

#### 115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?  Yes  No

#### Auditor Overall Compliance Determination

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

## Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act policies require the facility investigators impose an evidentiary standard no higher than a preponderance of evidence in determining whether allegations of sexual misconduct are substantiated in any administrative investigation. This requirement is also documented through the Specialized Investigation Training lesson plan and was confirmed during the facility Investigator interview.

## Standard 115.73: Reporting to inmates

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

#### 115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  Yes  No

#### 115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  NA

#### 115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident

whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No

- Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (d)

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

#### 115.73 (e)

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

#### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires that notifications to inmates who makes an allegation that they have suffered sexual abuse at the USDB must be done in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded upon completion of the investigation by the agency including those handled by CID.

These policies further require that following an inmate allegation that a staff member committed sexual abuse against the inmate, the facility subsequently must inform the inmate whenever the employee is on his unit, no longer employed in the facility or if the employee was indicted or charged. Unless the investigation has determined that the allegation was unfounded. If the inmate was alleged to have been sexually abused by another inmate, the inmate is informed whenever: the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or convicted on a charge related to sexual abuse within the facility.

These reporting requirements were discussed and confirmed by the Deputy Commandant. There were no cases involving this type staff misconduct requiring this notification within the last 36 months.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

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

##### 115.76 (a)

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

##### 115.76 (b)

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

##### 115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?  Yes  No

##### 115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?  Yes  No

## Auditor Overall Compliance Determination

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

## Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA), 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act and the 15th Military Police Brigade Regulation 190-3, Rules of Conduct describe the punishment for violation of the Army Zero tolerance policy for Soldiers and civilian staff.

Termination is the presumptive penalty for violating any of the USDB sexual abuse policies. For civilians this means removal from federal employment and criminal prosecution. For the military staff it means processing them out of the service court martial and criminal prosecution. Sexual harassment penalties are commensurate with the nature and circumstances of the incident.

The interview with the Deputy Commandant confirmed that any sexual misconduct with inmates and the harassing and retaliating against any inmate for participating in an official investigation would be grounds for staff dismissal.

No staff member has been terminated or disciplined for any violation of the agency zero tolerance sexual abuse policy during the last three years.

## Standard 115.77: Corrective action for contractors and volunteers

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

#### 115.77 (a)

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

#### 115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  Yes  No

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 auditor conducted three contractor/volunteer interviews at the time of the site visit. All three indicated that they had received a background check and PREA training prior to be allowed entrance into the USDB. They informed the auditor the training they received included the agency zero tolerance policy and the consequences for any violation. The auditor reviewed their training records and each confirmed that they had received and understood this training information by their signature.

The Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA), 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act and the 15th Military Police Brigade Regulation 190-3, Rules of Conduct policies require that any contractor or volunteer who engages in sexual abuse be removed from the facility and reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The Deputy Commandant confirmed the policy sanctions during his interview.

No contractors or volunteers has been terminated or removed for any violation of the zero tolerance sexual abuse policy during the last three years.

## Standard 115.78: Disciplinary sanctions for inmates

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

#### 115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?  Yes  No

#### 115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?  Yes  No

#### 115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?  Yes  No

#### 115.78 (d)

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

#### 115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?  Yes  No

#### 115.78 (f)

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

#### 115.78 (g)

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

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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.*

Army Corrections Command (ACC) Policy Letter 16, Institutional Offenses, dated 13 Jan 11, details the offenses under which an inmate may be disciplined for following an administrative finding that the inmate engaged in sexual misconduct specifically including inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

The policy requires the sanctions be commensurate with the nature and circumstances of the abuse committed, taking into account the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories, and consider whether an inmate's mental disabilities or mental illness contributed to his behavior. Special considerations are required for inmates charged with or suspected of a disciplinary infraction who are mentally ill to determine if the disability or mental illness contributed to the behavior when determining what type of sanction should be imposed. The Deputy Commandant confirmed these considerations during his interview.

## MEDICAL AND MENTAL CARE

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

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

##### 115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

##### 115.81 (b)

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

##### 115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

### 115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?  
 Yes  No

### 115.81 (e)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination mandate that anytime an inmate discloses or anytime it is noted somewhere in the inmate record that he has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the assessment.

The auditor discussed the risk assessment process with two staff members who conduct them. Each indicated that they follow facility policy and offered documentation showing it was offered to inmates disclosing prior victimization during their intake screening. The auditor also interviewed ten (10) inmates who had disclosed prior victimization and each indicated that they were offered intervention services with mental health when they disclosed this information to the assessment staff. The auditor reviewed each of their files and observed the referral annotated.

These risk assessment staff also stated that if the risk assessment or other information made available to them denotes that the inmate previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, they offer a follow-up meeting with a mental health practitioner within 14 days of the intake screening as well. The auditor found this mental health referral annotated in an inmates' file who had a history of abusive behavior.

The facility and agency policy mandates that all information related to sexual victimization or abusiveness is strictly limited to medical and mental health practitioners and other staff, as necessary, so safety and security

decisions including housing, bed, work, education, and program assignments can be made. Interviews conducted with medical staff and mental health practitioners confirmed information is shared only on a need to know basis.

## Standard 115.82: Access to emergency medical and mental health services

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

#### 115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?  
 Yes  No

#### 115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?  Yes  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

#### 115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?  Yes  No

#### 115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  
 Yes  No

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act are the policies medical staff must follow ensuring victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

The auditor interview with a medical practitioner at the USDB indicated that no forensic exams were performed at the institution over the last three years. This was also the amount indicated in the Pre Audit Questionnaire. However any inmate requiring a forensic exam is sent to St. Lukes Cushing Medical Center. That hospital conducted no forensic exams on any inmates from the USDB during the last 36 months.

The medical staff at the institution informed the auditor that victims of sexual abuse are offered information about provided access to sexually transmitted infections prophylaxis. Typically started at St.Lukes and continued at the USDB. All treatment services are provided to every victim of sexual abuse without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Interviews with staff first responders confirmed they understood the role of the first responder including taking actions to protect the victim and then notifying the shift supervisor.

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

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

#### **115.83 (a)**

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  Yes  No

#### **115.83 (b)**

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  Yes  No

#### **115.83 (c)**

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

#### **115.83 (d)**

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)  Yes  No  NA



### 115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)  Yes  No  NA

### 115.83 (f)

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

### 115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  Yes  No

### 115.83 (h)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires the USDB provide medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Both medical and mental health practitioners interviewed stated that the care these services are provided are consistent with the community level of care. They further stated any inmate disclosing

he experienced prior sexual victimization, whether it occurred in an institutional setting or in the community are offered a meeting with a medical and a mental health practitioner within 14 days of disclosure to staff. The treatment victims receive when required include, follow-up services, treatment plans, and referrals for continued care following their transfer to, or placement in, other facilities.

These policies also require when the screening indicates any inmate has previously perpetrated sexual abuse, whether it is in an institutional setting or in the community, he is to be offered a follow-up meeting with a mental health practitioner within 14 days the facility becoming aware. These services are also offered at no cost to the inmate. The auditor also interviewed ten (10) inmates indicating prior victimization to staff during their risk assessment. All of them indicated they were offered medical and mental health referrals if they wanted one.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

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

#### 115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?  Yes  No

#### 115.86 (b)

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

#### 115.86 (c)

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

#### 115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?  Yes  No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?  Yes  No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  Yes  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No

- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?  Yes  No

### 115.86 (e)

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

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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.*

A PREA Incident Review Committee is convened at The USDB within thirty (30) days of the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. This Committee is comprised of the Deputy Commandant, the PREA Compliance Manager, Director or Deputy Director for Treatment, Operations, Programs, Institutional Services, Investigator and Judge Advocate General Office with input from relevant personnel as requested. The 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires the Commandant conduct an administrative review for all alleged sexual abuse and staff sexual harassment incidents, unless the allegation was determined unfounded.

This same policy requires members of the committee review the circumstances of the incident. The final report contains the name(s) of the person(s) involved; events leading up to and following the incident; a consideration of whether the actions taken were consistent with agency policies and procedures; consider whether the allegation or investigation indicates a need to change policy or practice to better detect, or respond to sexual abuse; consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility; an examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; an assessment of the adequacy of staffing levels in that area during different shifts; an assessment as to whether monitoring technology should be deployed or augmented to supplement supervision by staff; recommendations to the facility administrator and PREA Manager for improvements based on the above assessments.

The facility is required to implement any recommendations the review team makes that result from the review, or document the reasons for not doing so. The incident review reports were reviewed at the time of the site visit.

## Standard 115.87: Data collection

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

#### 115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  Yes  No

#### 115.87 (b)

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

#### 115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  Yes  No

#### 115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  Yes  No

#### 115.87 (e)

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

#### 115.87 (f)

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

### Auditor Overall Compliance Determination

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

## Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) and the 15th Military Police Brigade Regulation 1-2 Prison Rape Elimination Act requires policies, requires uniform data be collected for every incident of sexual abuse alleged to have occurring at the USDB using a standardized instrument and set of definitions. Data from this facility is sent to the central office where it is aggregated annually with the other the four facilities. The incident-based data includes information needed to complete the standardized instrument Survey of Sexual Violence 2012 (SSV) to the Department Of Justice. All available incident-based documents, including reports, investigation files, and sexual abuse incident reviews shall be maintained, reviewed, and collected as needed to complete the SSV.

The 2016 PREA Annual Report is available for review on the agency's website (<https://www.army.mil/opmg>). The auditor reviewed the 2014 SSV, 2015 SSV and prior annual reports as part of the audit process.

## Standard 115.88: Data review for corrective action

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

#### 115.88 (a)

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

#### 115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse  Yes  No

#### 115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?  Yes  No

#### 115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  Yes  No

#### Auditor Overall Compliance Determination

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

#### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) office collects, maintains, and reviews from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews from each of its' facilities. The USDB provides sexual abuse statistics to this Central Office to assist them in creating the PREA Annual Report. This annual report documents trends, concerns etc. within the agency aggregate total.

Each of the five correctional facilities is included in this aggregate number provided in the Survey on Sexual Victimization (SSV2) each September to Department of Justice (DoJ). The last form was submitted prior to the September 1, 2016 deadline. The Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act policy requires the agency review all incident-based sexual abuse data in order to assess and improve the effectiveness of the sexual abuse prevention, detection, and response policies, procedures, and training. This is accomplished by identifying problematic areas, taking corrective action on an ongoing basis and preparing the annual report of findings and corrective actions for each facility, as well as the agency as a whole.

#### Standard 115.89: Data storage, publication, and destruction

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

#### 115.89 (a)

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

### 115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?  Yes  No

### 115.89 (c)

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

### 115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  Yes  No

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative

*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 Army Corrections Command (ACC) Policy Letter # 35 Prison Rape Elimination Act (PREA) requires ACC maintain, review, and collect data from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

The Agency is required to retain all records for 10 years after the date of initial collection. CID policy requires that they maintain criminal records for 50 years.

The 2016 Annual Report is available on the website for review (<https://www.army.mil/opmg>). Before publishing the annual report, all personal identifiers are removed per policy.

## AUDITING AND CORRECTIVE ACTION

## Standard 115.401: Frequency and scope of audits

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

#### 115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.)  
 Yes  No  NA

#### 115.401 (b)

- During each one-year period starting on August 20, 2013, 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?  Yes  No

#### 115.401 (h)

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

#### 115.401 (i)

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

#### 115.401 (m)

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

#### 115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?  Yes  No

### Auditor Overall Compliance Determination

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

### Instructions for Overall Compliance Determination Narrative



*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 Army Corrections Command ensued each of the facilities under their command was compliant with the PREA Standards beginning in 2013. All of their facilities were audited and in compliance with each of the forty three standard during the first cycle. As noted earlier this is the second audit for the United States Disciplinary Barracks into the second cycle.

## **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 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 Final Audit Report issued.)  Yes  No  NA

#### **Auditor Overall Compliance Determination**

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

#### **Instructions for Overall Compliance Determination Narrative**

*The 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 Army Corrections Command provides a copy of each of their audited facilities audit report on the agency web site.



## AUDITOR CERTIFICATION

I certify that:

The contents of this report are accurate to the best of my knowledge.

No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

### Auditor Instructions:

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

[Click here to enter text.](#)

[Click here to enter text.](#)

**Auditor Signature**

**Date**

---

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

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