

**PREA AUDIT REPORT     Interim    Final  
ADULT PRISONS & JAILS**

**Date of report:** April 30, 2017

<b>Auditor Information</b>			
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<b>Date of facility visit:</b> April 25-26, 2017			
<b>Facility Information</b>			
<b>Facility name:</b> Ramsey County Correctional Facility			
<b>Facility physical address:</b> 297 S. Century Ave, Maplewood, MN 55119			
<b>Facility mailing address:</b> <i>(if different from above)</i> Click here to enter text.			
<b>Facility telephone number:</b> 651-266-1402			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Superintendent Allen Carlson			
<b>Number of staff assigned to the facility in the last 12 months:</b> 183			
<b>Designed facility capacity:</b> 556			
<b>Current population of facility:</b> 313			
<b>Facility security levels/inmate custody levels:</b> Security levels: 1, 2 & 3			
<b>Age range of the population:</b> 19-63			
<b>Name of PREA Compliance Manager:</b> Chris Belfield		<b>Title:</b> Captain	
<b>Email address:</b> <a href="mailto:chris.belfield@co.ramsey.mn.us">chris.belfield@co.ramsey.mn.us</a>		<b>Telephone number:</b> 651-266-1424	
<b>Agency Information</b>			
<b>Name of agency:</b> Ramsey County Community Corrections Department			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Click here to enter text.			
<b>Physical address:</b> 121 7 <sup>th</sup> Place East, St. Paul, MN 55101			
<b>Mailing address:</b> <i>(if different from above)</i> Click here to enter text.			
<b>Telephone number:</b> 651-266-2670			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> John Klavins		<b>Title:</b> Director	
<b>Email address:</b> <a href="mailto:john.klavins@co.ramsey.mn.us">john.klavins@co.ramsey.mn.us</a>		<b>Telephone number:</b> 651-266-2384	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Marc Peterson		<b>Title:</b> PREA Coordinator	
<b>Email address:</b> marc.peterson@co.ramsey,mn,us		<b>Telephone number:</b> 651-266-2304	

## AUDIT FINDINGS

### NARRATIVE

The Ramsey County Correctional Facility (RCCF) was audited on April 25-26, 2017. A review of the pre-audit documents had been conducted prior to the on-site visit. The initial meeting began at approximately 8:30 AM and was attended by Assistant Superintendent Ron Bergee, Captain Tim Vasquez, Captain Trevor St. Germaine, Lt. Clinton Zahnow, Public Health Nurse Clinician Pamela Winter, Liz Reetz, John Bruner, Operations Captain Jeff Good, PREA Coordinator Marc Peterson, and Captian/PREA Compliance Manager Chris Belfield. The audit process was discussed and a list of additional documents were requested for review as part of the audit. The staff schedule and inmate roster were provided during the initial meeting.

The facility tour was conducted by Captain Chris Belfield, PREA Coordinator Marc Peterson joined us for the tour. During the initial tour, all areas of the facility were toured which included the control room, the male and female admissions areas, kitchen and laundry areas, education/programming areas, recreation area, inmate housing areas, administrative offices, health services, and the mental health offices. During the facility tour, this auditor noted that PREA related material and the PREA Audit notices were visibly posted throughout the facility. The RCCF has a digital CCTV system that covers all areas of the jail with video retention. During the twelve months prior to the audit there was one forensic medical examination completed and one forensic medical examination completed by a SANE Nurse. There were eleven reports of sexual abuse and sexual harassment of which zero were founded, 7 were unfounded, and 4 were unsubstantiated.

During Phase I, this auditor reviewed specific documentation that was supplied with the Pre-Audit Questionnaire. During the onsite audit, this auditor requested copies of additional documentation and information for compliance with PREA. This included review of staff backgrounds, follow-up questions on staff orientation and training records, contractor and volunteer training and orientation documents, inmate PREA education documents, and screening tools. Interviews' were conducted with the Director, Superintendent and Assistant Superintendent, PREA Coordinator, PREA Compliance Manager, Intermediate-or-Higher –Level facility staff, Investigative staff, Medical and Mental Health staff, member of Incident Review Team, Volunteers/Contractors, staff member charged with monitoring, Intake staff, staff who perform risk screenings, randomly selected staff, and randomly selected inmates.

Ramsey County Community Corrections Department Mission Statement:

### Mission

Building safe and healthy communities through interventions  
that promote personal change and accountability

## DESCRIPTION OF FACILITY CHARACTERISTICS

The Ramsey County Correctional Facility (RCCF) is a Class VI facility as defined by rule 2911.0200.S.13 from the Minnesota Department of Corrections 2911 Licensing Rules Adult Detention Facilities. The RCCF has a licensed capacity of 556 inmates and houses sentenced adult males and females for periods of time not to exceed any limits set by Minnesota Statutes. The RCCF has a contract with another Minnesota County Jail to house their presentenced female inmates for periods of time not to exceed any limits set by Minnesota Statutes. The RCCF was built in 1959 and has undergone four additions, the most recent completed in 2008.

The RCCF is one large two level building that consists of two separate admission areas (one area is used for female admissions and has two holding cells and one area is used for male admissions and has three holding cells), central control, laundry, kitchen, multiple programming areas, library, learning centers, gym, health services which has 5 beds, administrative offices for custody supervisors, mental health providers, treatment providers, and other ancillary positions. The RCCF uses video visitation for visits between inmates and their friends and family. There are 13 housing units: one fifty-six bed and two 32 bed units for female housing; one 30 bed mental health dorm, two thirty-two bed dorms, four custody units which consists of one 50 bed unit, two sixteen bed units, and one eighteen bed unit; one thirty-two bed work release dorm, one thirty-six bed dorm, one three bed segregation unit, and multiple isolation cells for male and female inmates.

The RCCF's kitchen is managed by custody staff that have been certified in the culinary field who supervise inmate workers who have completed the certificate training program. Based on classification, part of the inmate population eats their meals in the cafeteria through a serving line and the remainder of the meals are placed on individual food trays and delivered to the housing units and served to the inmates. The RCCF kitchen prepares meals and delivers them to two additional facilities.

The RCCF's laundry is managed by custody staff that have been certified in the laundry field who supervise inmate workers who have completed the certificate training program. Laundry services is responsible for cleaning the linens, towels, and clothing for the facility. The RCCF has laundry service contracts with other facilities within the County.

The RCCF contracts with Ramsey County Public Health to provide a Public Health Nurse Clinician and a staff of nurses and medical assistants that provide health care delivery to the inmates. The RCCF also has contracts for a Medical Doctor and Dental Services.

The RCCF has a remarkable Programs Department that offers programs to inmates on various set schedules. The inmates are offered adult basic education programs in reading, writing, math, and GED prep. Classes are available to the inmates on personal finance, job seeking and retention, career exploration, computer skills, and driver's license preparation and testing. Library that is updated weekly, religious services available in multiple denominations and recovery programs such as Alcoholics Anonymous, Avalon and Relapse Recovery. Inmate work crews assigned to jobs in the kitchen, laundry room, and golf course, nursery, or dorm cleaners. The RCCF works in conjunction with Century College to provide workforce development training. Inmates learn new skills both in the classroom and in a hands-on environment in the facility's nursery, kitchen, and laundry. The programs are certified by Century College and taught by the learning center school instructors and correctional officers. Work and school release programs are also offered.

## **SUMMARY OF AUDIT FINDINGS**

On April 25-26, 2017 two site visits were completed at the Ramsey County Correctional Facility (RCCF) in Ramsey County, Minnesota. The RCCF exceeded 3 standards; met 38 standards; 0 standards were not met; 2 standards not applicable

Number of standards exceeded: 3

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 2

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

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

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

- (a) Policy RDR 10.1b DEPT- Prison Rape Elimination Act (PREA) – Page 2 and Policy SC-15.17 – Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 1 outlines the Ramsey County Correctional Facility's (RCCF) zero tolerance policy with regard to sexual abuse and sexual harassment and the Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Policy SC-15.17 – Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Pages 7-8 outlines the sanctions that will be imposed on staff, contractors, volunteers, and inmates for violating the RCCF's PREA Policy.
- (b) The RCCCD Organizational Chart displays an Agency PREA Coordinator who is responsible for the development, implementation, and oversight of the Agency's efforts to comply with the PREA Standards. The PREA Coordinator reports having sufficient time and authorization to oversee development and implementation processes for compliance with the PREA Standards. The RCCF has a designated PREA Compliance Manager who provides oversight of the RCCF's efforts to comply with the PREA Standards on a daily basis. The PREA Compliance Manager has direct access to the PREA Coordinator for updates on development and implementation processes and for reporting any incidents of Sexual Abuse or Sexual Harassment that occur at the RCCF. The PREA Compliance Manager also reports having sufficient time and authorization to ensure all agency efforts to prevent sexual abuse and sexual harassment have been implemented.
- (c) Interviews with the Director, Superintendent and Assistant Superintendent verified the strong commitment they have in maintaining an Agency culture for zero tolerance for sexual abuse and sexual harassment.

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

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

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The RCCF does not contract with other entities for confinement of their inmates. Therefore this standard is not applicable. The RCCF does have language in their Prison Rape Elimination Act Policy which is in compliance with this standard.

### Standard 115.13 Supervision and monitoring

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

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- (a) The RCCF has a comprehensive written staffing plan that meets the requirements of (a) 1-11 of this standard and Department of Corrections 2911.0900 Rule. The staffing plan includes supplementing staffing with video monitoring and digital recording of the cameras. All cameras were in working order and properly maintained. Interviews with the Superintendent, Assistant Superintendent, and PREA Compliance Manager verified the staffing plan is submitted to the Department of Corrections on an annual basis for approval.
- (b) The RCCF does not deviate from the Department of Corrections approved staffing plan. In the twelve months prior to the audit there has been zero deviations from the staffing plan. The RCCF has a group of intermittent custody staff to provide shift coverage to maintain minimum staffing levels, if necessary voluntary or mandated overtime are used when needed to maintain the minimum staffing level. During the interview with the Superintendent and Assistant Superintendent they verified that the Facility would document any instance of non-compliance with the staffing plan and a full 2911 review would be done if an incident of non-compliance occurred in the Facility.
- (c) The Facility's staffing plan includes a "Staffing Plan Review" section that states the staffing plan will be reviewed no less frequently than once annually by the Facility Superintendent in collaboration with the PREA Compliance Manager. The PREA Coordinator verified he meets with the PREA Compliance Manager annually to review the staffing plan.
- (d) Policy RDR 10.1b DEPT – Prison Rape Elimination Act (PREA) – Page 8 requires the Supervisor or Supervisor on duty conduct unannounced rounds. This policy also prohibits staff from alerting other staff that supervisory rounds are occurring, unless the announcement is related to a legitimate operational need. Staff interviews confirm unannounced rounds are conducted. Unannounced rounds were verified through review of jail logs and video recordings.

### Standard 115.14 Youthful inmates

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

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The Ramsey County Community Corrections Department operates a Juvenile Detention Facility; the RCCF's Policy - SC-15.17 Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment states "The RCCF does not accept youthful Offenders." Therefore this standard is not applicable

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

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

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

- (a) Policy RDR 10.1b DEPT – Prison Rape Elimination Act – Page 6 states the RCCF will not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by a medical doctor. In the twelve months prior to the audit, there has been zero cross-gender strip searches and zero body cavity searches of inmates.
- (b) Policy SC 15.94 - Pat and Strip Search of Inmates – Page 1 states that strip searches will be conducted by officers of the same gender. In the course of their routine duties, female officers may pat search male inmates. Male officers will not pat search female inmates, unless exigent circumstances exist. Female inmates stated that they have not been restricted access to jail programs or other out of cell opportunities. Interviews with inmates and staff confirmed male officers do not pat search female inmates. There is always at least one male and one female officer on duty during each shift which was verified through staff and inmate interviews. In the twelve months prior to the audit, there has been zero cross-gender pat searches of female inmates by male officers.
- (c) Policy SC 15.94 – Pat and Strip Search of Inmates – Page 1 states that strip searches will be conducted by officers of the same gender and a shift Lieutenant must authorize the search and document the search noting associated exigent circumstances if it becomes necessary for a male officer to pat search a female inmate.
- (d) Policy IR 19.1 – General Rights of Inmates to services and Living Quarters – Page 1 allows inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental to routine well-being checks. The shower and bathroom areas allow inmates' their privacy. Policy SC 15.11 – Cross Gender Staff Notification – Page 1 requires all housing officers to announce the presence of opposite gender staff entering the housing unit if opposite gender staff are not already present. Interviews with staff and inmates confirm inmates are able to shower, perform bodily functions, and change clothing out of view of opposite gender officers. Interviews with staff, inmates, and first hand observation verified and demonstrated opposite gender officers announce their presence. Inmates commented that they had respect for the officers and will wait to change etc. until the officer of the opposite gender completes their duties.
- (e) Policy RDR 10.b DEPT – Prison Rape Elimination Act – Page 6 prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Staff interviews confirmed they follow this policy. At the time of the on-site audit, there was zero transgender or intersex inmates being housed in the facility.
- (f) The officers have been provided training to conduct cross-gender pat down searches and searches of transgender and intersex inmates in a professional and respectful manner. The training module and staff training logs were reviewed and officers were able to explain the pat down search process. On the dates of the on-site audit, and the twelve months prior to the audit, there has been zero transgender or intersex inmates housed at the facility.

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

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

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

Policy RO 20.43 – Information to Inmates – Pages 1-3 and Policy RDR 10.b DEPT – Prison Rape Elimination Act – Page 4 addresses this standard. The RCCF has procedures in place to assist inmates who are limited English proficient, are deaf or hard of hearing, and those who are blind or have low vision equal opportunity to participate in or benefit from all aspects of the RCCF's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Agency has contracts with multiple language lines and interpretive services to assist inmates with disabilities and inmates who are limited English proficient in participating in the RCCF's zero tolerance for sexual abuse and sexual harassment.

Interviews with staff verified that inmate interpreters or readers have not or would not be used. In the twelve months prior to the audit, there was zero instances of inmate interpreters, readers, or other types of inmate assistants used.

On the dates of the on-site audit, there was zero inmates with disabilities or inmates who were limited English proficient in custody. The RCCF exceeds this standard by providing multiple language lines and interpretive services to assist inmates with disabilities and inmates who are limited English proficient equal opportunity to participate in all aspects of their efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

### Standard 115.17 Hiring and promotion decisions

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

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

- (a) Policy HR 3.1a DEPT – Values and Overall Steps – Page 9 prohibits the hiring or promoting individuals who have any substantiated sexual offense, who have been civilly or administratively adjudicated or convicted of engaging or attempting to engage in sexual activity on their criminal background or employment history. All applicants for employment who have received a verbal offer for hire and contractors are required to answer the questions on the Prison Rape Elimination Act Self-Disclosure Questions Form which covers (a) 1-3 of this standard.
- (b) Policy HR 3.1a DEPT – Values and Overall Steps – Page 9 states incidents of sexual harassment shall be considered in determining whether to hire or promote any employee.
- (c) Policy HR 3.1a DEPT – Values and Overall Steps – Page 10 requires a criminal records background check be completed before hiring new employees. Ramsey County Community Corrections requires an applicant or



contractor provide a signed authorization that permits a PREA Employment Questionnaire inquiring about any incidents of prior sexual harassment be sent and completed by all former institutional employers.

- (d) Policy HR 3.1a DEPT – Values and Overall Steps – Page 10 requires criminal background checks be performed before enlisting the services of any contractor who may have contact with inmates. Review of records and this auditors personal experience of completing the process verifies this standard.
- (e) Policy HR 3.1a DEPT – Values and Overall Steps – Page 10 states criminal background checks are conducted every five years or before any promotion for all employees. Review of records confirms compliance with this standard.
- (f) All applicants for employment who have received a verbal offer for hire, contractors, and promotions are required to answer the questions on the Prison Rape Elimination Act Self-Disclosure Questions Form which states: All applicants for employment who have received a verbal offer for hire, contractors, and promotions are required to answer the questions on the Prison Rape Elimination Act Self-Disclosure Questions Form In order for the Ramsey County Community Corrections Department (RCCCD) to be in compliance with the directives of the Prison Rape Elimination Act (28 CFR Parts 115.17, 317), applicants for employment who have received a verbal offer for hire are required to answer the following questions as honestly and completely as possible. Failure to answer questions, incomplete answers, or untruthful responses may result in the rescinding of the offer. All answers will be evaluated by the Department’s Administration.
- (g) The RCCCD will provide information on substantiated allegations of sexual abuse or harassment involving a former employee upon receiving a request from an institutional employer, unless prohibited by law. The RCCCD requires all new hires, contractors, and promotions through a rigorous background process that exceeds the requirements of this standard, therefore the RCCF exceeds this standard.

#### **Standard 115.18 Upgrades to facilities and technologies**

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

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Interviews with the Director, Superintendent, and Assistant Superintendent confirmed that PREA considerations would be taken into consideration in any future substantial expansions or modifications of the existing facility. The RCCF has upgraded their video monitoring system and added cameras to the facility to enhance their ability to protect inmates from sexual abuse. The RCCF will be adding additional cameras to provide additional coverage in a certain area in the facility.

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

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

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

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

- (a) Policy RDR 10.1 DEPT – PREA Investigations – Pages 4-5 outlines the RCCF’s uniform evidence protocol used to maximize the potential for obtaining usable physical evidence for administrative investigations. The RCCF is responsible for conducting administrative sexual abuse investigations. The RCCF has a signed Memo of Understanding with the Maplewood Police Department to conduct criminal sexual abuse investigations. Maplewood Police Department has one investigator who has received specialized training for conducting sexual abuse investigations in a confinement setting.
- (b) Policy MH 9.2a DEPT – PREA Medical and Mental Health Care – Page 1 ensures that inmates, clients, and residents under the care of Ramsey County Community Corrections (RCCCD) receive prompt medical and mental health services at no charge, when they are alleged to have become victims of sexual assault or sexual abuse, whether or not they cooperate with the investigations. Forensic medical examinations will be conducted at Regions Hospital, St. Paul Minnesota <https://www.regionshospital.com/rh2/index.html> . Regions Hospital has a SANE Program and a SANE nurse is available 24/7. The RCCF has a signed Memo of Understanding with Regions Hospital to ensure that inmates and residents in the custody of Ramsey County Community Corrections facilities are given access to medical care in the event they are sexually assaulted while in custody, or prior to arriving in custody.
- (c) Ramsey County Community Corrections has a signed Memorandum of Understanding with St. Paul – Ramsey County Public Health’s Sexual Violence Services (SOS) <https://www.ramseycounty.us/residents/health-medical/clinics-services/sos-sexual-violence-services> to provide advocacy and support during medical forensic exams and counseling services for victims and victims support.
- (d) The RCCF has a signed Memorandum of Understanding with the Maplewood Police Department to conduct sexual abuse investigations following the requirements outlined in this standard.

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

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

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Policy RDR 10.1 DEPT – PREA Investigations – Page 1 provides guidelines for the investigation of all sexual assault, sexual abuse, and sexual harassment incidents in accordance with the national standards set forth in the Prison Rape Elimination Act of 2003 (PREA). The RCCC vigorously investigates all matters of sexual assault, sexual harassment, and sexual misconduct. Trained investigators from the RCCC will conduct all administrative investigations and a trained investigator with the Maplewood Police Department will conduct all criminal investigations. In the twelve months prior to the audit, there were eleven allegations of sexual harassment that were investigated administratively and two allegations referred for criminal investigations. Ramsey County Community Corrections publishes their policy on their website: <https://www.ramseycounty.us/your-government/departments/health-and-wellness/community-corrections/prison-rape-elimination-act-0> . Interviews with the Director confirmed that an administrative and/or criminal investigation will be completed on allegations of sexual abuse and sexual harassment.

### Standard 115.31 Employee training

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

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Policies RDR 10.b – DEPT – Prison Rape Elimination Act – Pages 3 & 8; RDR 10.1c – DEPT – PREA First Reponse; AO 1.2b – Reporting Abuse and Neglect address this standard. The RCCF uses Relias Training Modules, National Institute of Corrections, and ErgoMetric Training which covers a(1-10) of this standard. Staff are required to review PREA Policies and complete Relias Training Modules annually. Current and newly hired staff have received appropriate training tailored to the facility's population. The RCCF maintains electronic staff training records. Interviews with staff confirmed their training and understanding of PREA and their responsibilities in preventing, detecting, and responding to sexual assault and harassment.

### Standard 115.32 Volunteer and contractor training

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

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Policy RDR 10.b – DEPT – Prison Rape Elimination Act – Page 3 & 8 address this standard. The RCCF requires that volunteers must complete online PREA 101 Training [http://www4.co.hennepin.mn.us/prea/story\\_html5.html](http://www4.co.hennepin.mn.us/prea/story_html5.html), review the Prison Rape Elimination Act Policy, and submit the Volunteer PREA training confirmation form. The confirmation form states acknowledgment and understanding of the PREA training. Interviews with volunteer/contractors confirmed understanding of their PREA training.

### Standard 115.33 Inmate education

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

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

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

Policy RDR 10.b – DEPT – Prison Rape Elimination Act – Pages 6-7; Policy RO– 20 43 – Information to Inmates – Pages 2-4 address this standard. During the admission process inmates are shown a PREA video, provided a copy of the inmate handbook and are required to sign a receipt of information form acknowledging they have received or been told how to access the following information which includes receipt of the inmate handbook and the RCCF’s Sexual Abuse/Harassment Policies and Procedures . PREA information is also displayed on posters throughout the facility. The RCCF provides inmate education materials in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, limited reading skills, or otherwise disabled. Interviews with staff verified the admission process in regard to PREA education for each inmate. Interviews with inmates verified they receive PREA education before they leave the admission area prior to being placed into the inmate population.

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

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

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Policy RDR 10.b –DEPT – Prison Rape Elimination Act – Page 9 states the RCCF provides specialized training for staff that respond to and/or investigate allegations of sexual misconduct, to include crime scene management and investigation, victim sensitivity, and crisis intervention. Document that investigators have completed the required specialized training in conducting sexual abuse investigations. The RCCF has nine investigators who have received specialized training using the Moss Groups Specialized Training: Investigating Sexual Abuse in Confinement Settings Curricula. The RCCF has a Memorandum of Understanding with the Maplewood Police Department who has one investigator trained to conduct Sexual Abuse Investigations. Interviews with an investigator verified compliance with this standard. Training records were provided in the Pre-Audit Questionnaire and verified during the on-site audit.

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

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

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

### **corrective actions taken by the facility.**

Policy RDR 10.b – DEPT – Prison Rape Elimination Act – Page 9 states the RCCF will document that medical and mental health practitioners receive training regarding detection, assessment, evidence preservation, response, reporting, and conducting examinations, as well as the employee training. The medical and mental health care providers have received Specialized Training: PREA Medical and Mental Care Standards using the Moss Groups Curricula. Interviews with medical and mental health staff verified knowledge and understanding of the training. Training records were provided in the Pre-Audit Questionnaire and verified during the on-site audit.

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

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

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

Policy RDR 10.b – DEPT – Prison Rape Elimination Act – Page 7 & Policy CL 21.2 – PREA Screening and Reassessment requires inmates to ordinarily be screened within 72 hours of arriving at the RCCF for their risk of being sexually abused or sexually abusive toward other inmates. The RCCF has developed an objective screening instrument that considers d(1-9) & e of this standard. The RCCF does not detain inmates solely for immigration purposes. Probation Officers complete the RCCF’s PREA Assessment Tool Questions with each inmate privately and complete reassessments within 30 days from the inmate’s arrival based upon any additional, relevant information received by the facility since the initial screening. An inmate’s risk level will also be reassessed: When warranted due to the following: referrals, requests, incidents of sexual abuse, or receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness; When an inmate identifies as either transgender or intersex in order to review any safety concerns, their placement and programming assignments; Reassessment to be completed twice per year, if appropriate. Every 30 days, the facility shall afford each inmate a review to determine whether there is a continuing need for separation from the general population if Isolation Housing is recommended under the Special Accommodations Section. Staff interviews confirm that inmates are screened within 72 hours using the RCCF’s screening tool and reassessments are completed when necessary. Interviews with inmates verified that they have been asked a series of questions from the screening instrument during their initial meeting with a Probation Officer which generally happened within 72 hours. Policy states inmates and residents shall not be disciplined for refusing to answer or for not disclosing information during screening in response to questions asked pursuant to physical, mental or developmental disabilities; whether they are perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; and/or their own perception of vulnerability. Interviews with staff verify inmates are not disciplined for refusing to answer or not disclosing information during screening in response to questions asked pursuant to physical, mental, or developmental disabilities; whether they are perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; and/or their own perception of vulnerability. The agency has implemented controls through rights in their jail system allowing only Probation Officers and above to have access to the completed screening assessments.

### Standard 115.42 Use of screening information

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

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

Policy CL 21.2 – PREA Screening and Assessment – Page 2 states determine housing of the inmate, giving serious consideration to the inmate's view with respect to his or her safety and ensure documentation is placed in the inmate's file. Policy CL 21.2 – PREA Screening and Assessment – Page 2 states information from the PREA Risk Assessment will be used to inform 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. Interviews with staff verify that the assessments are used for medical and mental health alerts, special housing, and to determine who is at risk of sexual victimization or at risk of being sexually abusive. Individual determinations about how to ensure the safety of each inmate is determined by the screening instrument using weighted questions to classify an inmate using a level 1-3 system and identifying inmates that are at risk or are likely abusers. Staff interviews verified the use of this process in determining housing placement for each inmate on a case-by-case basis. Policy CL 21.3 – Transgender and Intersex Inmates – Page 1 states in deciding whether to assign a transgender or intersex inmate to a unit housing male or female inmates, and in making other housing and programming assignments, the RCCF will consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security concerns. Staff interviews verified housing placement of transgender and intersex inmates is determined on a case-by-case basis. Interviews with staff verify that placement and programming of each transgender and intersex inmates will be reassessed every 90 days to review any threats to safety experienced by the inmate. Policy CL 21.2 – PREA Screening and Assessment – Page 2 states determine housing of the inmate, giving serious consideration to the inmate's view with respect to his or her safety and ensure documentation is placed in the inmate's file. Staff interviews confirmed that a transgender or intersex inmate's own views of his or her safety would be given serious consideration in housing and programming placement. Policy CL 21.2 – PREA Screening and Assessment states ensure that transgender and intersex inmates are given the opportunity to shower separately from other inmates. Staff interviews and the tour of the on-site audit verified each housing area has individual showers that allows transgender and intersex inmates the opportunity to shower separately. Policy prohibits placing lesbian, gay, bisexual, transgender, or intersex inmates in a dedicated unit. The RCCF is not subject to a consent decree, legal settlement, or legal judgment requiring that it establish a dedicated facility, unit, or wing for LGBTI inmates. Which was verified through interviews with staff. At the time of the on-site audit and the twelve months prior to the audit, there was zero transgender or intersex inmates admitted to the facility.

### Standard 115.43 Protective custody

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

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

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

Policy SM 18.4 – Administrative Segregation – Protective Custody - Pages 1-2 prohibits placement of 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. If such an assessment cannot be conducted immediately, the inmate may be held in involuntary segregated housing for less than 24 hours while completing the assessment. Ensure inmates placed in segregated housing have access to programs, privileges, education, and work opportunities to the extent possible. If any restrictions to program access, privileges, education, or work opportunities are necessary, document: The opportunities that have been limited; The duration of the limitation; The reasons for such limitations. Ensure inmates are assigned to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If any inmate is placed in involuntary segregated housing, document: The basis for the concern for the inmate’s safety; The reason why no alternative means of separation can be arranged. The operations captain will visit the inmate on a weekly basis to assess the inmate’s attitudinal, behavioral, and psychological adjustment and progress and to determine the need for removal from or continuance on protective custody. Interviews conducted with staff confirmed that an inmate placed in involuntary segregated housing would be moved within 24 hours and segregated housing is generally used for short term stays of 3 days or less.

#### **Standard 115.51 Inmate reporting**

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

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

Policy RDR 10.1c DEPT – PREA First Response – Page 4 states Ramsey County Community Corrections (RCCC) provides multiple methods for inmates, clients and residents to report allegations of sexual assault, sexual harassment, and sexual misconduct. The inmate handbook outlines multiple ways inmates can privately report sexual abuse and sexual harassment which includes: request and grievance forms, verbal reporting, anonymous reports, contacting Sexual Offense Services (SOS), and third-party reporting. Inmate interviews verified knowledge of contact information available in the inmate handbook and posters everywhere in the building. Several inmates said they would report the information to an officer or specific employees they would be comfortable reporting to. Interviews with staff confirmed inmates could use the kiosk, call the posted hotlines, or report in person. Staff verified they would accept reports verbally, in writing, anonymously, and from third parties. Verbal reports would be documented in an incident report as soon as possible.

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 2 states the RCCF maintains multiple ways for inmates to report allegations of sexual abuse/harassment, including a method for inmates to anonymously report to an entity that is not part of the RCCF and a method for the RCCF to receive third party reports. The RCCF also provides a method for staff to privately report sexual abuse/harassment. The RCCF has a memorandum of Understanding with Sexual Offense Services (SOS)

<https://www.ramseycounty.us/residents/health-medical/clinics-services/sos-sexual-violence-services> and the

Maplewood Police Department to accept inmate reports of sexual abuse or harassment to an agency that is not part of the RCCC Divison. Facility staff are provided a Preventing and Reporting Sexual Misconduct With Inmates Brochure that includes multiple ways staff can privately make reports of sexual abuse and sexual harassment of inmates. Staff interviews reported having full confidence in the RCCF's Administration that every report of sexual abuse or harassment would be accepted and fully investigated.

#### **Standard 115.52 Exhaustion of administrative remedies**

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

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

Policy IR 19.25 – Inmate Grievances – Pages 1-4 provides inmates an internal grievance process for expression and resolution of inmates' complaints. It is the responsibility of staff to direct an inmate to place an inmate grievance in the grievance box detailing the nature of the grievance, if it deemed an emergency, the supervisor must be immediately notified. A time limit is not imposed on when an inmate can submit a grievance regarding allegations of sexual abuse. An inmate will not be required to use any informal grievance process, or attempt to resolve with staff, an alleged incident of sexual abuse. A final decision must be made within 90 days of the initial filing of the grievance. This does not include any time consumed by inmates in preparing any administrative appeals; An extension of up to 70 days may be permitted in the event a decision requires more consideration and/or time; Ensure that the inmate is notified in writing of any such extension, and provide a date by which a decision will be made; If the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial of the grievance. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, will be permitted to assist inmates in filing grievances relating to allegations of sexual abuse and harassment, and will also be permitted to file such requests on behalf of inmates. When an emergency grievance is received alleging an inmate is subject to a substantial risk of imminent sexual abuse: Provide an initial response within 48 hours; Provide a completed final decision within 5 calendar days; Document the determination of whether the inmate is at substantial risk of imminent sexual abuse, the action taken in response to the emergency grievance, and the RCCF's initial response and final decision. The RCCF will consider discipline for any inmate who intentionally filed an emergency grievance where no emergency exists, only when filed in bad faith. In the twelve months prior to the audit, there was zero grievances or emergency grievances filed alleging sexual abuse or sexual harassment, or substantial risk of imminent sexual abuse.

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

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



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

Policy - RDR – 10.1c – PREA First Response – addresses this standard. The RCCF has a signed Memorandum of Understanding with Sexual Violence Services (SOS) <https://www.ramseycounty.us/residents/health-medical/clinics-services/sos-sexual-violence-services> to provide outside advocacy services for emotional support to inmates. The SOS phone number is listed in the inmate handbook as a free confidential call. The address and phone number (identified as a fee confidential call) are listed on the PREA posters displayed in all areas of the facility.

### **Standard 115.54 Third-party reporting**

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

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

The RCCF has a signed Memorandum of Understanding with SOS <https://www.ramseycounty.us/residents/health-medical/clinics-services/sos-sexual-violence-services> and the Maplewood Police Department <http://www.ci.maplewood.mn.us/460/Police> to accept third-party reports of sexual abuse and sexual harassment of inmates. Contact information for any person or inmate to report any allegations of sexual abuse or harassment on behalf of an inmate is posted on the RCCF web-site: <https://www.ramseycounty.us/your-government/departments/health-and-wellness/community-corrections/prison-rape-elimination-act-0>.

### **Standard 115.61 Staff and agency reporting duties**

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

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

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment - Page 1 states the RCCF mandates a zero-tolerance policy regarding sexual abuse and sexual harassment to promote a safe and humane environment pursuant to PREA standard 115.11. All staff, contract staff, and volunteers must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse/harassment that occurred in any correctional facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or

violation of responsibilities that may have contributed to an incident or retaliation. The RCCF investigates all matters of sexual abuse and sexual harassment promptly, thoroughly, and objectively, including third-party and anonymous reports. Policy RDR 10.1c DEPT - PREA First Response – Page 4 states employees, contractors, visitors, volunteers, interns, medical and mental health practitioners, and school personnel must immediately report any knowledge, suspicion, or information regarding an incident of sexual assault, sexual harassment, or sexual misconduct that occurs at RCCF to his or her direct supervisor or the PREA Coordinator. Policy SC – 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 2 states all reports and allegations of sexual abuse/harassment are confidential. Staff are prohibited from revealing any information related to a sexual abuse/harassment reports except to institutional authorities making treatment, investigative, and other security and management decisions. Policy SC – 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 3 states Medical and Mental Health Practitioners will inform inmates of their duty to report and the limitations of confidentiality at the initiation of service. Interviews with staff verifies that they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates and staff who reported an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews with the Superintendent, Assistant Superintendent, and PREA Coordinator verified State or local law will be followed (mandated reporting) if an allegation is made by someone who is considered a vulnerable adult. The Superintendent and Assistant Superintendent confirmed all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are reported to designated investigators. Interviews with Medical and Mental Health Staff confirmed they disclose the limitation of confidentiality and duty to report to inmates at the initiation of services. And upon learning of any information regarding sexual abuse or sexual harassment will report the information to a supervisor.

**Standard 115.62 Agency protection duties**

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

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

Policy SM 18.4 - Administrative Segregation – Protective Custody – Page 1 states if the RCCF staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, they will take immediate action to protect the inmate. Interviews with staff verified they would take immediate action to protect the inmate. Interviews with the Director, Superintendent, and Assistant Superintendent confirm that the RCCF will take immediate action to protect an inmate from imminent sexual abuse or harassment. In the twelve months prior to the audit, there has been zero instances the Facility has concluded that an inmate was subject to a substantial risk of imminent sexual abuse.

**Standard 115.63 Reporting to other confinement facilities**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

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

Policy RDR 10.1c DEPT - PREA First Response – Page 8 addresses this standard. Interviews with the Director, Superintendent, and Assistant Superintendent verified that any reports of sexual abuse or sexual harassment received from another facility or agency that happened at the RCCF would be investigated no differently than an allegation reported in the facility. In the twelve months prior to the audit, the RCCF received 19 reports from inmates that he/she was sexually abused or harassed while confined in another facility. Notification documentation was submitted with the Pre- Audit Questionnaire. In the twelve months prior the the audit, the RCCF received zero allegations from another facility that an inmate was sexually abused or harassed while in RCCF custody.

#### **Standard 115.64 Staff first responder duties**

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

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

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Pages 4–5 and Policy RDR 10.1c DEPT - PREA First Response – Pages 5-6 outlines the first responder duties for staff to follow after a report of a sexual assault. Staff have a First Responder Checklist to follow and pocket PREA First Responder checklist they carry on their person. Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 3 states any Volunteers, Contract Staff, and Any Staff not First Responder Trained -Request that the alleged victim not take any actions that could destroy physical evidence; and Notify security staff or an RCCF supervisor. In the twelve months prior to the audit, there were three allegations that an inmate was sexually abused. There were zero times a first responder has to separate the alleged victim and abuser; there was one allegation where staff was notified within a time period that still allowed for the collection of physical evidence, of these allegations there was zero times the first facility staff member responded to the report and had to initiate a(2-4) of this standard.

#### **Standard 115.65 Coordinated response**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion**

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

The RCCF has a comprehensive coordinated response for responding to incidents of sexual abuse. The plan includes an outline of responsibilities for first responders, supervisors/shift Lieutenants, PREA Coordinator and PREA Compliance Manager, Superintendent or designee, health services and mental health staff, and PREA Investigators.

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

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

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

The Director verified that Agency Administration maintains the right to remove alleged staff abusers from contact with any inmates pending the outcome of an investigation or a determination of whether and what extent discipline is warranted which is included in the labor agreements.

#### **Standard 115.67 Agency protection against retaliation**

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

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

Policy RDR 10.1d – PREA Investigations – Page 2 states that staff, volunteers, interns, and contractors are prohibited from any form of retaliation against an inmate, client, resident, or staff who makes an allegation of sexual assault, sexual abuse, or sexual harassment, or who testifies in a PREA investigation. Retaliatory behavior will result in disciplinary action up to and including dismissal. Page 4 states the RCCF will protect inmates, residents, clients, and staff who report sexual assault, sexual abuse, and sexual harassment from retaliation by other inmates, residents, clients, and staff. Efforts may include the following: Separate victims and abusers by changing housing; Remove alleged staff or resident/inmate abusers from contact with victims; Offer to provide mental health and/or emotional support services and document these efforts; In consultation with the PREA Coordinator, designate the staff member responsible for monitoring for retaliation to follow up with the inmate, client or resident; Immediately report any retaliation against staff, inmates, clients or residents to the PREA Compliance Manager. For incidents that are substantiated or unsubstantiated, if the victim or any individual who cooperates with an investigation expresses a fear of retaliation, collaborate with PREA Coordinator and Division management to take appropriate

measures to protect the individual. If initial monitoring indicates a continuing need, staff shall continue to monitor after the change(s) is made, including periodic status checks, and monitoring beyond 90 days following the report. Monitor inmate/resident disciplinary reports, housing changes, and program changes, and client sanctions for signs of retaliation. The RCCF completes a form that is used for monitoring retaliation.

#### **Standard 115.68 Post-allegation protective custody**

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

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

Policy SM 18.4 – Administrative Segregation – Protective Custody - Page 1-2 prohibits placement of 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. If such an assessment cannot be conducted immediately, the inmate may be held in involuntary segregated housing for less than 24 hours while completing the assessment. Ensure inmates placed in segregated housing have access to programs, privileges, education, and work opportunities to the extent possible. If any restrictions to program access, privileges, education, or work opportunities are necessary, document: The opportunities that have been limited; The duration of the limitation; The reasons for such limitations. Ensure inmates are assigned to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If any inmate is placed in involuntary segregated housing, document: The basis for the concern for the inmate’s safety; The reason why no alternative means of separation can be arranged. If any inmate is placed in involuntary segregated housing, document: The basis for the concern for the inmate’s safety; The reason why no alternative means of separation can be arranged. The operations captain will visit the inmate on a weekly basis to assess the inmate's attitudinal, behavioral, and psychological adjustment and progress and to determine the need for removal from or continuance on protective custody. In the twelve months prior to the audit, there has been zero inmates placed in involuntary segregated housing for 1 to 24 hours waiting for completion of assessment; and zero inmates placed in involuntary segregated housing for longer than 30 days while awaiting alternative placement.

#### **Standard 115.71 Criminal and administrative agency investigations**

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

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

Policy RDR 10.1d DEPT – PREA Investigations – Pages 1-3 addresses this standard. The RCCF has nine investigators who have received specialized training pursuant to standard 115.34 who conduct administrative investigations. The RCCF has a Memorandum of Understanding with the Maplewood Police Department to conduct criminal investigations by an investigator who has been trained pursuant to standard 115.34. All substantiated allegations of conduct that appear to be criminal will be referred for prosecution. The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person’s status as an inmate or staff. An inmate who alleges sexual abuse will not be required to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of an alleged allegation. An interview with an investigator and review of investigative files verifies the RCCF’s investigative process follows the requirements of this standard. Since August 2012, there were two substantiated allegations of conduct that appeared to be criminal that were referred fo prosecution.

### **Standard 115.72 Evidentiary standard for administrative investigations**

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

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

Policy SC 15.17 – Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 8 states the RCCF will employ preponderance of the evidence as the evidentiary standard. The interview with the investigator confirmed that the standard imposed to substantiate administrative investigations is the “preponderance of the evidence.”

### **Standard 115.73 Reporting to inmates**

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

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

Policy RDR 10.1d DEPT – PREA Investigations – Page 2 states inmates, clients, or residents whose allegations of sexual assault, sexual abuse, and/or sexual harassment result in investigations shall be notified of the results of the investigations by RCCF staff until the inmate, client or resident is released from custody or supervision. Page 3

states the PREA Investigator will document all notifications and/or attempted notifications of findings, whether substantiated, unsubstantiated or unfounded, to alleged victims.

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 6 states the PREA Compliance Manager will inform the alleged victim as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, subsequently inform the inmate (unless the allegation is unfounded) whenever: The staff member is no longer posted within the inmate’s unit; The staff member is no longer employed by the RCCF; The staff member has been indicted on a charge related to sexual abuse within the RCCF.

This duty to report will terminate if the inmate is released from Ramsey County custody.

Following an inmate’s allegation that he or she has been sexually abused by another inmate, subsequently inform the alleged victim whenever: The alleged abuser has been indicted on a charge related to sexual abuse within the RCCF; The alleged abuser has been convicted on a charge related to sexual abuse within the RCCF.

This duty to report will terminate if the inmate is released from Ramsey County custody.

Interviews with the Superintendent, Assistant Superintendent, and investigator verified that inmates are notified in person and the conversation documented when an inmate is informed of the final disposition of their allegation following an investigation. The investigator would be responsible for monitoring the progress of an investigation being conducted by the Maplewood Police Department on a weekly basis through completion and reporting updates to the Superintendent, Assistant Superintendent, PREA Coordinator, and PREA Compliance Manager. In the twelve months prior to the audit, there were six inmates notified of the final disposition of an investigation and six final dispositions that were documented.

#### **Standard 115.76 Disciplinary sanctions for staff**

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

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

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 7 outlines disciplinary sanctions for RCCF staff. Staff will be subject to disciplinary sanctions up to and including termination for violating RCCF sexual abuse or sexual harassment policies/procedures. Termination will be the presumptive disciplinary sanction for staff who commit an act of substantiated sexual abuse. All disciplinary sanctions will be 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. All PREA related terminations or resignations by staff who would have been terminated if not for their resignation, will be reported to law enforcement agencies and to any relevant licensing bodies, unless the activity was clearly not criminal. In the twelve months prior to the audit, there has been one staff member from the facility who has been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. In the twelve months prior to the audit, there was one staff member from the facility that has been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.

### Standard 115.77 Corrective action for contractors and volunteers

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

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

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 7 outlines disciplinary sanctions for volunteers and contractors. Any contract staff or volunteer who commits an act of substantiated sexual abuse will be prohibited from contact with inmates and reported to law enforcement agencies and any relevant licensing bodies unless the activity was clearly not criminal. The RCCF will take appropriate remedial measures, and will consider whether to prohibit further contact with inmates, in the case of any other violation of sexual abuse or sexual harassment policies. The Superintendent and Assistant Superintendent were clear that a contractor or volunteer would immediately be removed and banned from the facility pending the investigation into an allegation of sexual abuse or sexual harassment. Contractors or volunteers may be allowed back into the facility on a case-by-case basis for violating any other sexual abuse or sexual harassment policies. In the twelve months prior to the audit, zero contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates. In the twelve months prior to the audit, zero contractors or volunteers have been reported to law enforcement for engaging in sexual abuse of inmates.

### Standard 115.78 Disciplinary sanctions for inmates

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

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

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Pages 7–8 outlines disciplinary sanctions for inmates. Any criminal or administrative finding of inmate-on-inmate sexual abuse will result in disciplinary sanctions pursuant to a formal disciplinary process. Any sanctions will be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, the sanctions imposed for comparable offenses by other inmates with similar histories, and whether an inmate's mental disabilities or mental illness contributed to his or her behavior. The RCCF may discipline an inmate for sexual contact with staff only upon determining that the staff member did not consent to such contact. A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying. Any sexual contact between inmates is prohibited and may be subject to disciplinary action. However, such activity does not constitute sexual abuse unless it is determined that the activity was not consensual.



Interviews with the Superintendent and Assistant Superintendent confirmed that inmates are subject to discipline following an administrative or criminal finding that an inmate engaged in inmate-on-inmate sexual abuse.

In the twelve months prior to the audit, there was zero administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility.

In the twelve months prior to the audit, there was zero criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.

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

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

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

Policy MH 9.2a DEPT - PREA Medical and Mental Health Care – Pages 1–2 states an inmate, client or resident who alleges that he or she has been a victim of sexual assault or sexual misconduct in a confinement institution shall be offered emergency medical and mental health services. Upon receiving information indicating that an inmate, client or resident has experienced sexual assault or sexual abuse or has perpetrated sexual assault or sexual abuse, notify health services staff according to the standard procedures at each facility. Medical and mental health practitioners shall obtain informed consent from inmates, clients and residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate, client or resident is under the age of 18. Interviews with staff confirmed they refer inmates to medical/mental health staff if a screening indicates that an inmate has experienced prior sexual victimization whether in an institutional setting or in the community. Interviews with medical and mental health practitioners confirm they receive informed consent before reporting about prior victimization that did not occur in an institutional setting. The PREA Compliance Manager maintains a data base to ensure referred inmates are seen within fourteen days.

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

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

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

Policy RDR 10.1c DEPT - PREA First Response – Page 5 states that any inmate, client, or resident who alleges that he or she has been a victim of sexual assault, sexual abuse or sexual harassment shall be offered prompt access to emergency medical and mental health services at no cost to himself or herself. Inmates, clients, and residents who have limited English proficiency (LEP) and/or any physical or cognitive/intellectual disabilities will also be provided with prompt assistance.

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 4 states staff will notify on duty medical staff of the allegation of sexual abuse. If no medical staff are on duty, proceed to step 6. Arrange for transportation for the alleged victim to Regions Hospital as directed by medical staff or as necessary in the absence of medical staff.

Policy SC – 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 2 states any inmate who alleges that he/she has been a victim of sexual abuse will be offered timely, unimpeded access to emergency medical and mental health services at no cost to himself/herself. This includes emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate, and pregnancy tests to inmate victims of sexually abusive vaginal penetration while incarcerated.

Interviews with medical and mental health staff confirm that inmates would receive access to emergency medical treatment within 24 hours of notification. Inmates will be provided timely information about access to emergency contraception and sexually transmitted infection prophylaxis at Regions Hospital. The RCCF would follow the treatment plan set by the SANE Nurse.

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

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

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

Policy MH 9.2a DEPT - PREA Medical and Mental Health Care – Page 1 states an inmate, client or resident who alleges that he or she has been a victim of sexual assault or sexual misconduct in a confinement institution shall be offered emergency medical and mental health services. Page 3 states the evaluation and treatment of sexual abuse victims shall include 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.

Policy SC 15.17 - Preventing, Reporting, and Responding to Sexual Abuse and Sexual Harassment – Page 2 states that the medical and mental health services will be consistent with the community level of care.

Policy MH 9.2a DEPT - PREA Medical and Mental Health Care – Page 2 states to offer victims who have experienced vaginal penetration while incarcerated pregnancy tests, and timely information about and access to all lawful pregnancy-related medical services. Offer to inmate-victims timely information about and access to emergency contraception services and sexually transmitted infections prophylaxis. Page 3 states to provide crisis intervention and trauma-specific treatment by contacting medical and mental health professionals to perform those services at no charge to the alleged victim, whether or not he or she names the attacker or harasser. Interviews with medical and mental health staff verify compliance with this standard.

### Standard 115.86 Sexual abuse incident reviews

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

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

Policy RDR 10.1d DEPT – PREA Investigations – Page 4–5 following a PREA investigation that results in a finding of a substantiated or unsubstantiated incident, conduct a Sexual Abuse Incident Review with the Deputy Director or Superintendent (if RCCF), PREA Compliance Manager, Deputy Director for Community Relations and External Communications, and Supervisor. In collaboration with Investigator and Sexual Assault Review Team (SART), discuss and review Sexual Abuse Incident Review reports within 30 days following the close of the investigation. Ensure that SART reports are prepared, including: (1) recommendations to change policy when applicable; (2) whether incidents or allegations were motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, or transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) whether physical barriers in the area where the incident occurred may enable abuse; (4) assessment of the adequacy of staffing during different shifts; and (5) whether monitoring technology should be deployed or augmented to supplement staff supervision. Monitor and ensure that facilities implement the recommendations of the SART or receive documentation of reasons for not doing so. In the twelve months prior to the audit, the SART Team conducted one incident review at the RCCF. An incident review form was included in the Pre-Audit Questionnaire which was reviewed during phase I of the audit. Interviews with staff confirm an incident review is completed following a PREA investigation that results in a substantiated or unsubstantiated incident.

### Standard 115.87 Data collection

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

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

Policy AO 1.6e DEPT - PREA Documentation and Data Storage and Policy RDR 10.1b DEPT – Prison Rape Elimination Act (PREA) Policy Definitions address this standard. In collaboration with the PREA Coordinator and PREA Compliance Managers, RCCC Department and Division staff shall collect data concerning every allegation of sexual harassment, sexual assault, and sexual misconduct at facilities and confinement settings. The PREA Coordinator creates and publishes an agency-wide annual report. RCCC is prepared to provide their data to the U.S. Department of Justice, upon request.

### Standard 115.88 Data review for corrective action

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

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

Policy AO 1.6e DEPT - PREA Documentation and Data Storage addresses this standard. Each facility shall report annual statistics and corrective actions to the PREA Coordinator. The PREA Coordinator shall create and publish an agency-wide annual report which presents the data and identifies corrective actions taken to address the problems and a comparison of the current year's data with those from prior years. The Department Director shall approve this report. The Annual Report will be published on the RCCC web-site: <https://www.ramseycounty.us/your-government/departments/health-and-wellness/community-corrections/prison-rape-elimination-act-0> . Interviews with staff and review of documentation confirm compliance with this standard.

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

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

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

Policy AO 1.6e DEPT - PREA Documentation and Data Storage addresses this standard. The sexual abuse data collected is retained on a jail system secured by system rights. The PREA Coordinator shall create and publish an agency-wide annual report which presents the data and identifies corrective actions taken to address the problems and a comparison of the current year's date with those from prior years. The Department Director shall approve this report. The Annual Report will be published on the RCCC web-site: <https://www.ramseycounty.us/your-government/departments/health-and-wellness/community-corrections/prison-rape-elimination-act-0> .

Data collection, storage, retention, access, publication, and description of reports and data shall be implemented according to statute, rules, and policies. Exceptions would occur when the release of information would present a threat to the safety and security to a division. Review of the Annual Report confirms compliance with this standard.

Data pertaining to sexual assault, sexual harassment, and/or sexual misconduct must be retained for a minimum of ten (10) years following the date of the initial collection. Exceptions would be directed by federal, state or local laws or rules.

**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.

Darnel Carlson\_\_\_\_\_

May 26, 2017\_\_\_\_\_

Auditor Signature

Date