

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



BJA

Bureau of Justice Assistance
U.S. Department of Justice

Name of facility: Lake County Sherriff's Office
Adult Correctional Division

Physical address: 20 S. County Street Waukegan, Illinois

Date report submitted: January 17, 2015

Address: PO Box 16054 Lansing, Michigan 48901

Email: fairbaa@comcast.net

Telephone number: (517) 303-4081

Date of facility visit: January 12-13, 2015

Facility Information

Facility mailing address: (if different from above)

Telephone number:

The facility is:

Military

County

Federal

Private for profit

Municipal

State

Private not for profit

Facility Type:

Jail

Prison

Name of PREA Compliance Manager:

Daniel Sheline

Title:

Sgt.

Email address: DSheline@lakecountryil.gov

Telephone number:

847 377-4170

AUDIT FINDINGS

NARRATIVE:

On January 12-13, 2015, an audit was conducted at the Lake County Sherriff's to determine compliance with the Prison Rape Elimination Act standards finalized August 2012.

A complete tour of the facility was conducted on January 12, 2015. The following areas and operations were visited and observed: inmate living areas, medical operations, booking operations, transport operations, property room, holding cells, laundry services, commissary, library, education areas, food service, barbershop, garden and food service operations.

Documents reviewed for this audit included policy, contracts, training curriculums, staff training records, personnel files, contract/volunteer training records, logbooks, meeting minutes, sexual abuse & harassment complaints. Camera monitoring operations were also examined.

Formal interviews were scheduled through random selection of staff and inmates from schedules and rosters provided by the staff prior to the audit. They were conducted with the following: The Sheriff, Chief of Corrections Administration, PREA compliance manager/coordinator (two staff), medical staff (contract – Health Services Administrator, RN, social worker, Asst. Director of Mental Health Programs), human resource/lieutenant, corrections officers from all areas of the jail and each shift (one 7-2 shift, three 3-11 shift, two 11-7 shift) supervisors from each shift, two investigators, two classification staff, two programming staff, one contractual food service staff, ten random inmates, one with limited English, two in segregation and one with physical challenges (thirteen total). There were no transgender inmates at this facility at the time of the audit.

The auditor was allowed free access to all areas of the facility, access to interview inmates and staff selected randomly and intentionally, and to see any documentation requested. Posters were visible throughout the facility announcing the audit. No letters were received prior to the audit. No advocacy groups were identified as having shown interest in this facility.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Lake County Sheriff's Adult Detention Center is located north of Chicago, Illinois. It is a detention facility that houses up to 740 inmates, with 214 staff. The average population is 578, males and females. No youthful offenders are housed here. Contract services provide medical care and food service operations. Housing consists of single cells, multiple occupancy cells, open dorm housing and 48 segregation beds. Booking contains six holding cells and two group cells.

The mission of the Lake County Sherriff's Adult Correctional Facility is to maximize community protection, public safety and victim's rights through the custodial supervision of sentenced individuals and pre-trial detainees utilizing direct supervision and innovative community-based management principles.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 1

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 3

Standard number here

§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 comments, including corrective actions needed if does not meet standard

(a) written policy (b) upper level agency wide PREA coordinator (c) PREA compliance manager at the facility

This is addressed in policy 3.6-007 Prison Rape Elimination Act. A PREA coordinator has been designated.

Standard number here

§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)

Auditor comments, including corrective actions needed if does not meet standard

- (a) new contracts PREA requirements with private agency
- (b) new contract, contract monitoring included

This standard is not applicable to this facility as they do not have contract for the confinement of inmates with private agencies.

Standard number here

§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)

Auditor comments, including corrective actions needed if does not meet standard

- (a) staffing plan, includes eleven considerations
- (b) document deviations
- (c) PREA coordinator and agency determine adjustments
- (d) Policy for unannounced rounds, prohibit staff from alerting others

The requirements of this standard are addressed in 1.1-006 Staffing Requirements. Documentation supports there have been no deviations from the staffing plan, as well as staff interviews. Meetings are conducted to evaluate and review the staffing plan.

Standard number here §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)

N/A no youthful offenders. This was supported by the tour, interviews and review of documentation.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Only exigent circumstances for cross gender strip or cavity
- (b) Prohibit cross gender pat down searches of females (August 15, 2015 or August 20, 2017)
- (c) Document cross gender strip searches, cavity searches and pat down searches of females
- (d) Inmates can shower, perform bodily functions, change clothes . . . opposite gender announce their presence when entering the housing unit
- (e) Transgender not searched for sole purpose of determining genital status.
- (f) Train security staff in cross gender pat down and transgender/intersex inmates

The requirements of this standard are addressed in the following policies: 2.6-010 Strip Searches, 2.6-019 Internal Transport, 4.2-001 Inmate Programs and Services, 3.3-002 Inmate Hygiene, and 2.3-002 Housing Relief Procedures. Cross gender searches are not conducted, including pat down searches. This was confirmed by staff and inmate interviews.

Standard
number here

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Disabilities, intellectual, psychiatric or speech have equal opportunity, including written materials
- (b) Agency takes reasonable steps, including interpreters
- (c) Not rely on inmate interpreters (unless limited circumstances)

County of Lake contracts with Language Line Solutions and uses staff interpreters as needed. There is a plan in place to assist inmates who are blind, hearing impaired, mentally ill or disabled. Policy 3.6-007 Prison Rape Elimination Act indicates that inmates will not be used for interpreters unless circumstances dictate the need.

Standard
number here

§115.17 – Hiring and Promotion Decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Not hire employee or contractor who has engaged in abuse, convicted of sexual activity by force, civilly or administratively adjudicated
- (b) Shall consider incidents of sexual harassment
- (c) Before hiring perform back ground checks, check references
- (d) Including contractors
- (e) Background check every five years
- (f) Ask applicants about previous misconduct described and impose continuing affirmative duty
- (g) Omissions grounds for termination
- (h) Agency provides information to other

This is addressed in 1.3-007 Employment Status. Review of Security Applications and background checks support compliance with this standard as well as the interview with the administrative lieutenant.

Standard number here §115.18 – Upgrades to Facilities and Technology

- 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 comments, including corrective actions needed if does not meet standard

- (a) New facility or expansion or modification
- (b) Installing video monitoring

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There have not been any modifications. Additional cameras are continually requested and have been added. PREA considerations are discussed when determining their placement, as supported by numerous interviews. There are approximately 200 cameras currently in strategic locations to view most areas of activity and movement. They are not located where they would violate inmate privacy.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Uniform evidence protocol, maximizes potential for obtaining usable physical evidence
- (b) Protocols appropriate for youths
- (c) Offer forensic medical exams, document efforts if they cannot
- (d) Attempt to make available victim advocate from rape crisis center, if not then qualified staff person. Document efforts to secure services
- (e) Accompany the victim if requested
- (f) Request investigating agency follow the requirements
- (g) Includes State entity or DOJ
- (h) Qualified advocate has received appropriate education and has been appropriately screened.

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There is an MOU with Zacharias Sexual Abuse Center(ZSAC). There are limited SANE/SAFE staff available in the community and this is appropriately documented. The agency conducts both administrative and criminal investigations regarding sexual abuse/harassment. There have been seven investigations, one alleging abuse, which was referred for prosecution.

Standard number here **§115.22 – Policies to Ensure Referrals of Allegations for Investigations**

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

Auditor comments, including corrective actions needed if does not meet standard

- (a) Agency ensure administrative or criminal investigation completed for all allegations
- (b) Policy in place ensuring all allegations are referred, published on website or other means, all referrals documented
- (c) Publication describing responsibilities of separate entity and agency
- (d) State entity shall have a policy governing conduct of these investigations
- (e) DOJ

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Staff interviews and review of investigation documents support compliance with this standard.

Standard number here **§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)

Auditor comments, including corrective actions needed if does not meet standard

- (a) Train all employees with contact with inmates on ten elements
- (b) Tailored to the gender of the inmates at the facility
- (c) Current employees trained within one year
- (d) Document that employees understand the training they received.

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Acknowledgements demonstrate that employees' signature indicate they understood the training. Staff interviews revealed that staff is knowledgeable regarding the requirements of the PREA standards.

Standard number here **§115.32– Volunteer and Contractor Training**

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

Auditor comments, including corrective actions needed if does not meet standard

- (a) Train all volunteers/contractors with contact with inmates
- (b) Tailored to the services they provide, zero tolerance and how to report
- (c) Document that volunteers/contractors understand the training they received.

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Acknowledgements show that volunteer/contractors' signature indicates they understood the training. Interviews with contract staff, including administrators support that contract staff receive and are knowledgeable regarding the PREA standards.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) Intake, inmates receive information zero-tolerance, how to report
- (b) Thirty days, comprehensive information including retaliation
- (c) Current inmates educated within one year and upon transfer if different
- (d) Provide in format accessible to all inmates – disabled and limited English
- (e) Documentation of inmate participation in education sessions
- (f) Ensure key information is readily and continuously available

This is addressed in policy 3.6-007 Prison Rape Elimination Act. All inmates interviewed were aware of the law, acknowledged seeing the video and getting written materials. They were also aware of the hotline number located on the phone.

Standard number here **§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)

Auditor comments, including corrective actions needed if does not meet standard

- (a) Investigators have received special training
- (b) Includes techniques for interviewing abuse victims, Miranda and Garrity, sexual abuse evidence collection, criteria to substantiate
- (c) Documentation they have completed the training
- (d) State and DOJ provides training

This is addressed in policy 3.6-007 Prison Rape Elimination Act. All eight investigators have received the training. They use NIC training module which addresses all the requirements of the standard. This was supported by the interview with two investigators.

Standard number here

§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 comments, including corrective actions needed if does not meet standard

- (a) Full and part time medical and mental health care staff in the facility have been trained four requirements'
- (b) If they conduct forensic exams, they are trained
- (c) Documentation of training maintained
- (d) Also include training required for contractors and volunteer if that is their status

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Acknowledgements include a statement that employees' signature indicates they understood the training. All medical staff has been trained.

Standard number here

§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 comments, including corrective actions needed if does not meet standard

- (a) All inmates assess during intake screening and upon transfer to another facility for their risk of being abused or being an abuser
- (b) Takes place within 72 hours
- (c) Objective screening instrument
- (d) Considers ten areas
- (e) Considers prior acts of violence
- (f) Reassess within 30 days inmates risk
- (g) Reassessed when warranted
- (h) Not disciplined for not answering
- (i) Appropriate controls on dissemination

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Information is documented in the booking report and with the medical intake that occur immediately upon arrival. There is a system for reassessment of sexual victimization through the classification staff and referral to the social worker. Information contained in the classification record is controlled regarding dissemination and access.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Information used to inform housing, bed, work, education to keep separated
- (b) Individualized determinations
- (c) Transgender case by case
- (d) Placement, programming for transgender determined twice a year
- (e) Transgender, intersex own views given serious consideration
- (f) Transgender, intersex given opportunity to shower separately
- (g) Not placed in dedicated facilities unless due to a consent decree

This is addressed in policy 3.6-007 Prison Rape Elimination Act. The facility has separate showers. Classification documents demonstrate that individualized decisions are used for placement. Transgender inmates' views are given consideration. In the event that a transgender inmate did stay at the jail for six months, the PREA coordinator would ensure they are contacted to review their status. Both classification staff and medical staff revealed that they maintain and organization a wealth of information to ensure that inmates housing and mental/medical needs is addressed.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) High risk victimization not placed in involuntary segregation unless no other alternative the less than 24 hours
- (b) Will have access to programs, privileges, education, work to the extent possible. If restricted shall document limitations
- (c) Assigned to involuntary until alternative means not to exceed 30 days
- (d) Document
- (e) Review every 30 days

This is addressed in policy 3.6-007 Prison Rape Elimination Act. To date, those at risk of victimization have not been assigned to involuntary segregation. This was confirmed by segregation staff. There is a housing unit that offers single cells and a smaller population where those inmates alleging abuse/harassment can be placed.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) Multiple internal ways to privately report abuse, harassment, retaliation or staff neglect
- (b) One method to report to public or private entity
- (c) Staff shall accept verbal, writing, anonymous and third parties immediately and document
- (d) Agency provides a method for staff to report privately

This is addressed in policy 3.6-007 Prison Rape Elimination Act and the Inmate Handbook. This was confirmed by staff and inmate interviews. There is a hotline posted on each phone in every housing unit. The number was called from an inmate phone. It was answered with a live person.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) Agency exempt If no administrative procedures to use grievance for inmate abuse
- (b) No time limit on grievance for sexual abuse (1-4)
- (c) Ensures not submitted to staff who is subject and not referred to that staff
- (d) 90 days 1-4
- (e) Third party permitted to file (1-4)
- (f) Procedure for filing emergency grievance
- (g) Can discipline where filed in bad faith

This standard is not applicable to this facility. Grievances are not used for inmate abuse.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Access to outside victim advocates for emotional support services by mail or telephone, toll free hotline, reasonable communication in a confidential manner
- (b) Informed of the extent that it will be monitored
- (c) Maintain an MOU with community service providers

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There is an MOU with Zacharias Sexual Abuse Center (ZSAC).

Standard number here §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 comments, including corrective actions needed if does not meet standard

Method to receive and distribute publicly information on how to report

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There is information on how to report as a third party on the facility's website. No third reports have been received since the implementation of the PREA standards.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Staff required to report immediately
- (b) Staff not reveal any information than it needs to appropriate staff
- (c) Practitioners required to report abuse, limits on confidentiality
- (d) If victim is under 18
- (e) All reports to facility's designated investigator

This is addressed in policy 3.6-007 Prison Rape Elimination Act and Wexford Policy J-313 (I) Procedure. Compliance was supported by staff interviews.

Standard number here §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 comments, including corrective actions needed if does not meet standard

Inmate subjected to imminent abuse – Immediately action.

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Documentation was provided that demonstrated immediately action will be taken as well as staff interviews.

No Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Reporting to another facility
- (b) Within 72 hours
- (c) Documented
- (d) Facility head receives notification that investigation

This is addressed in policy 3.6-007 Prison Rape Elimination Act. To date, no notifications from other facilities have been received.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) First security staff required to , separate, preserve, collect victim, collect abuser
- (b) If not security, staff required to request alleged victim not destroy physical evidence then notify security staff

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Staff interviews demonstrated knowledge of the requirements and the facility's plan (who should be contacted, etc.)

Standard number here §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 comments, including corrective actions needed if does not meet standard

Institutional plan

This is addressed in policy 3.6-007 Prison Rape Elimination Act.

Standard number here §115.66 – Preservation of ability to protect inmates from contact with

number here 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 comments, including corrective actions needed if does not meet standard

- (a) Collective bargaining new contract limiting agency's ability
- (b) This standard doesn't restrict discipline and no-contact assignment

A review of the union contracts for sergeants and corrections officers revealed no limit to the agency's ability to remove a staff pending investigation. These are effective into November 2016.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Policy protects inmates and staff who report
- (b) Agency employs multiple protection measures
- (c) Monitor for retaliation for 90 days or beyond if needed
- (d) Inmates also periodic status checks
- (e) If fear of retaliation expressed, agency shall take appropriate measures
- (f) Do not have to monitor if allegation is unfounded

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There have been no instances requiring review up to 90 days due to the short term length of stay of the complainant. Staff interviews support there is knowledge and compliance of these requirements.

Standard number here §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 comments, including corrective actions needed if does not meet standard

This is addressed in policy 3.6-007 Prison Rape Elimination Act. As noted, the facility has a housing unit that provides additional attention and supervision to inmates with special needs.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) Investigation done promptly, thoroughly, objectively
- (b) Abuse – investigators have received specialized training
- (c) Investigators gather and preserve direct and circumstantial evidence
- (d) If criminal, will conduct interviews after consulting with prosecutor
- (e) Credibility assessed individually
- (f) Administrative investigations include whether staff actions or failures contributed, documented in the reports description of physical evidence, resonating behind credibility, investigative facts and findings
- (g) Criminal investigations thorough description of physical, testimonial and documentary evidence
- (h) Substantiated criminal referred
- (i) Agency retains all reports as long as abuser is incarcerated or employed plus five years
- (j) Departure of alleged abuser or victim does not terminate investigation
- (k) State, DOJ
- (l) Facility cooperates with outside investigators

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Six investigator certificates were reviewed. NIC training is used to train investigators. One investigation reviewed was completed promptly, thoroughly and objectively, referred for prosecution, and evidence collected and maintained.

It is recommended that the jail PREA coordinator receive copies of all completed investigations to be maintained in his area, as currently due to the fact that the investigators are operating out of the sheriff's office, there was some disconnect noted.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

No standard higher than preponderance of evidence

This is addressed in policy 3.6-007 Prison Rape Elimination Act and supported by the interview with the investigators.

Standard number here §115.73 – Reporting to Inmate

- 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 comments, including corrective actions needed if does not meet standard

- (a) Inform inmate whether allegation has been substantiated, unsubstantiated, or unfounded
- (b) If agency did not conduct, will request relevant information from investigative agency
- (c) When staff member did abuse (1 - 4)
- (d) When an inmate did abuse (1 – 2)
- (e) Notifications documented
- (f) Obligation terminated if released from custody

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Documentation showing notification was provided and supported by staff interviews.

Standard number here §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 comments, including corrective actions needed if does not meet standard

- (a) Staff disciplinary sanctions up to termination
- (b) Termination presumptive when sexual abuse
- (c) Commensurate with act, history, sanctions for similar histories
- (d) All reported to law enforcements unless not criminal and to licensing bodies

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There has been no staff discipline for sexual abuse or harassment since the implementation of the standards.

Standard number here §115.77 – Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Contractor, volunteer reported unless not criminal
- (b) Facility takes remedial measures, consider prohibiting contact when not criminal

This is addressed in policy 3.6-007 Prison Rape Elimination Act. There has been no contractor or volunteer discipline for sexual abuse or harassment since the implementation of the standards.

Standard number here §115.78 – Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Inmates subject to sanctions
- (b) Sanctions commensurate
- (c) consider mental disabilities
- (d) consider whether to require offender to participate in therapy
- (e) against staff if no staff consent
- (f) not falsifying if made in good faith
- (g) agency can prohibit all sexual activity between inmates but not deem it abuse if not coerced

Wexford Policy J-122 Mental Health Screening and Evaluation and Wexford Policy J-313 (I) Procedure in the event of sexual assault address this standard.

Standard number here §115.81 – Medical and mental health screenings; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Prison inmate experienced prior victimization follow up in 14 days
- (b) Prison inmate experienced prior perpetration follow up in 14 days
- (c) Jail inmate experienced prior victimization follow up in 14 days
- (d) This information limited to mental/medical and other staff deemed necessary
- (e) Get informed consent before reporting that didn't occur in an institutional setting

This is addressed in policy 3.6-007 Prison Rape Elimination Act, Wexford Policy J-122 Mental Health Screening and Evaluation and Wexford Policy J-313 Procedure in the event of sexual assault address this standard. Staff interviews and documentation support compliance with this standard.

Standard number here §115.82 – Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Victims unimpeded access to emergency services
- (b) If not on duty, first responders
- (c) timely information and timely access to prophylactic treatment
- (d) treatment provided to victims without treatment

This is addressed in policy 3.6-007 Prison Rape Elimination Act, and 2.7-007 Medical Emergency Plan.

Standard number here §115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Mental, medical to all victims evaluation and ongoing
- (b) Follow up, treatment plans, referrals
- (c) Consistent with community care
- (d) Pregnancy tests
- (e) If pregnant, appropriate legal treatment
- (f) STD tests
- (g) Treatment services without costs
- (h) Mental health evaluation of all know inmate on inmate abusers within 60 days

This is addressed in policy 3.6-007 Prison Rape Elimination Act and Wexford Policy J-313 (I) Procedure in the event of sexual assault. This was also supported by staff interviews.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) Incident review unless unfounded
- (b) Within 30 days
- (c) Team includes upper level management with supervisors, investigator, medical/mental health
- (d) The team considers 1-6 (policy, motivation, area, staffing levels, monitoring technology, prepare a report)
- (e) Implement or document why not

This is addressed in policy 3.6-007 Prison Rape Elimination Act and compliance demonstrated through documentation.

Standard number here **§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 comments, including corrective actions needed if does not meet standard

- (a) Accurate, uniform data, standardized instrument, definitions
- (b) Aggregate annually
- (c) Survey of Sexual Violence
- (d) Maintain from all available incident-based
- (e) Obtain from private facility
- (f) Provide to DOJ June 30

This is addressed in policy 3.6-007 Prison Rape Elimination Act.

Standard number here §115.88 – Data Review for Corrective Action

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Agency reviews data to assess, improve (1-3) identify problem areas, take corrective action, prepare annual report
- (b) Compare current with prior years
- (c) Available to the public

This is addressed in policy 3.6-007 Prison Rape Elimination Act and the Lake County Sheriff's Adult Correctional Facility Prison Rape Elimination Act 2014 PREA Coordinator's Annual Report, located on the website.

Standard number here §115.89 – Data Storage, Publication, and Destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 comments, including corrective actions needed if does not meet standard

- (a) Securely retained
- (b) Readily available to the public at least annually
- (c) Removes all personal identification
- (d) Maintained for 10 years

This is addressed in policy 3.6-007 Prison Rape Elimination Act. Information is posted on the web site: <http://www.lakecountylv.gov/sheriff/Pages/default.aspx> .

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Amy Fairbanks



Date January 17, 2015