

PREA Facility Audit Report: Final

Name of Facility: Community Corrections Center Omaha

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 03/19/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Karen d. Murray	Date of Signature: 03/19/2023

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	02/14/2023
End Date of On-Site Audit:	02/15/2023

FACILITY INFORMATION	
Facility name:	Community Corrections Center Omaha
Facility physical address:	2320 Ave J, Omaha, Nebraska - 68110
Facility mailing address:	

Primary Contact	
Name:	Rhiannon Kelley
Email Address:	Rhiannon.kelle@nebraska.gov
Telephone Number:	(402) 522-7032

Facility Director	
Name:	Shaun Settles
Email Address:	shaun.settles@nebraska.gov
Telephone Number:	(402) 595-2010

Facility PREA Compliance Manager	
Name:	Rhiannon Kelley
Email Address:	rhiannon.kelley@nebraska.gov
Telephone Number:	O: 402-522-7032

Facility Health Service Administrator On-Site	
Name:	Craig Formanek
Email Address:	craig.formanek@nebraska.gov
Telephone Number:	(402) 595-3964

Facility Characteristics	
Designed facility capacity:	90
Current population of facility:	179
Average daily population for the past 12 months:	176
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	Males
Age range of population:	21-85
Facility security levels/resident custody levels:	Community A & B
Number of staff currently employed at the facility who may have contact with residents:	39
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	6
Number of volunteers who have contact with residents, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	Nebraska Department of Correctional Services
Governing authority or parent agency (if applicable):	
Physical Address:	801 W Prospector Place, PO Box 94661, Lincoln, Nebraska - 68509
Mailing Address:	PO Box 94661, Lincoln, Nebraska - 68509
Telephone number:	4024712654

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Danielle Reynolds	Email Address:	danielle.reynolds@nebraska.gov

SUMMARY OF AUDIT FINDINGS

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	
2	<ul style="list-style-type: none"> • 115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.213 - Supervision and monitoring
Number of standards met:	
39	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-02-14
2. End date of the onsite portion of the audit:	2023-02-15

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</p>	<p>The agency has a long-standing statewide contract with a SANE.</p> <p>At this time the agency does not have an agreement with advocacy services; however, multiple attempts are documented.</p> <p>On 1.6.2023, at 6:09 pm, this Auditor sent the following email to NDCS PREA Reporting Form NDCS - Nebraska Department of Correctional Services to test the third-party reporting option to inmates, family and staff members. "My name is Karen Murray, and I am scheduled to audit the Reception and Treatment Center and am testing the third-party reporting system. Could you be so kind as to respond to this email with how you would proceed when you receive a third party PREA report."</p> <p>On 1.6.2023 at 10:17 pm, the Auditor received the following response from the Agency Captain / PREA Coordinator, stating, "In response to this email I would report the incident to the facility compliance manager to do follow up on what was reported, and then based off the victims interview I would reach out to the facility warden to determine the next steps to be completed."</p>
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AUDITED FACILITY INFORMATION

<p>14. Designated facility capacity:</p>	<p>90</p>
<p>15. Average daily population for the past 12 months:</p>	<p>176</p>
<p>16. Number of inmate/resident/detainee housing units:</p>	<p>4</p>
<p>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p>

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	179
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0

<p>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</p>	<p>2</p>
<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>40</p>

<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>0</p>
<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>4</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>15</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The facility provided an inmate roster by ID Number, Inmate Name, Housing Unit, Race, Gender, Job Assignment, Date of Birth and Intake Date and Targeted Category. Once targeted inmates were chosen by the Auditor, random inmates were chosen from the balance of the roster of those inmates who were not off site at work during the onsite review. Random inmates were then chosen by housing unit, and race,</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>8</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After a tour, informal and formal interviews with staff and inmates and inmate file review, this targeted category did not appear to be housed in the facility at the time of the onsite review.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After a tour, informal and formal interviews with staff and inmates and inmate file review, this targeted category did not appear to be housed in the facility at the time of the onsite review.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After a tour, informal and formal interviews with staff and inmates and inmate file review, this targeted category did not appear to be housed in the facility at the time of the onsite review.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After a tour, informal and formal interviews with staff and inmates and inmate file review, this targeted category did not appear to be housed in the facility at the time of the onsite review.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After a tour, informal and formal interviews with staff and inmates and inmate file review, this targeted category did not appear to be housed in the facility at the time of the onsite review.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>1</p>

<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After a tour, informal and formal interviews with staff and inmates and inmate file review, this targeted category did not appear to be housed in the facility at the time of the onsite review.</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>This facility does not have segregated housing.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Due to the facility having only five targeted residents, 15 random interviews were conducted.</p>
<h2>Staff, Volunteer, and Contractor Interviews</h2>	
<h3>Random Staff Interviews</h3>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Random staff from each shift were interviewed.</p>

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	15
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff

	<input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
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Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	File review was conducted by utilizing the PREA Audit - Community Confinement Documentation Review Employee/ and Resident Files/Records.
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	1	0	1	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	1	0	1	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	2	0	2	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	1	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	1	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	0	0	1
Staff-on-inmate sexual abuse	0	0	0	0
Total	1	0	0	1

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	2
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

Sexual Harassment Investigation Files Selected for Review

106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)

Inmate-on-inmate sexual harassment investigation files

108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
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<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>

<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No text provided.</p>
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p> <input type="radio"/> Yes <input checked="" type="radio"/> No </p>
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Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p> <input type="radio"/> Yes <input checked="" type="radio"/> No </p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p> <input checked="" type="radio"/> The audited facility or its parent agency <input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) <input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm) <input type="radio"/> Other </p>
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Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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.

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 3. Nebraska Department of Correctional Services Organizational Chart, dated 8.2021 4. Nebraska Department of Correctional Services, Community Corrections Center-Omaha Organizational Chart, date 1.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Residents 2. Targeted Residents 3. Case Workers and Corporals 4. Administrator Programs Officer I / PREA Compliance Manager <p>Through interviews with residents and staff and review of resident and staff files, it is evident that this facility interweaves requirements for this standard in their daily protocols. Both residents and staff could speak to facility PREA practices and protocols being used as is described in the agency's PREA policy.</p> <p>Resident interviews yielded comments such as 'we have good leaders here who make good decisions' and 'caring and empathetic staff who care about our wellbeing.'</p> <p>Interviews with Corporals, long term staff, yielded comments of concern and care that would be applied if a resident were to report an allegation of sexual harassment or sexual abuse. These staff spoke to their main concern being the residents were safe, felt safe, understood the processes that would follow their allegation and ensure them the processes are kept confidential.</p>

The interview and the pre-audit phase demonstrated the Administrator Programs Officer I / PREA Compliance Manager has the required time to implement PREA protocols.

Site Review Observation:

During the tour of the facility, the Auditor witnessed multiple Zero Tolerance flyers with information regarding the right to report, multiple internal and external options to report. Flyers were witnessed at the entry of the building, in dorm hallways, classrooms and in the dining area. Audit notices were posted on multi-colored paper and posted at the entry of the facility / dayroom / cafeteria, throughout the dorm hallways, and the Wardens complex area. Every resident is provided a tablet which has the PREA Agency Policy and Zero Tolerance flyer information in both English and Spanish.

The facility has three main resident hallways, 200, 300, and 400 with bedrooms that house three to four residents each. When entering hallways female announcements were made upon entry. Hallway 200 is the smallest of resident sleeping areas and has a bathroom with two showers curtained and two toileting stalls with doors. Hallway 300 are for residents who may be attending education classes and have onsite work detail. Hallway 400 are for residents who have offsite work detail. Each of these hallways have 20+ bedrooms housing three to four residents each. Residents in these halls have access to a shared bathroom in the hall, each having showers with curtains, toileting stalls with doors. All bedrooms have locking doors where residents are provided keys to control when the door may be locked. Facility staff are also provided a master key and can access bedrooms at any time. All hallways have three to five cameras, none with access into bathrooms or resident rooms.

(a) The Community Corrections Center Omaha PAQ states the facility mandates zero-tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract. The facility has a written policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 2, section GENERAL, states, "NDCS expressly prohibits sexual contact or

sexual acts between inmates and between inmates and team members, volunteers, official visitors or contractors. NDCS will cooperate with the Bureau of Justice Statistics (BJS) in providing required access to team members and inmates, statistical information and data collection with regard to sexual assault, sexual abuse and sexual harassment of inmates. In order to ensure compliance with PREA standards, NDCS shall conduct audits pursuant to the process outlined by the Department of Justice (DOJ). This policy applies to all persons, Central Office, Programs and institutions within the jurisdiction of NDCS. (ACI-3D-14).”

(b) The Community Corrections Center Omaha PAQ states The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities. The position of the PREA Coordinator in the agency's organizational structure. NDCS has a designated agency wide PREA Coordinator who reports to the NDCS Security Administrator.

The facility provided a Nebraska Department of Correctional Services Organizational Chart. The organizational chart demonstrates the PREA/ES Coordinator report directly to the Agency Security Administrator who reports directly to the Chief of Operations.

The facility provided a Nebraska Department of Correctional Services, Community corrections Center-Omaha Organizational Chart. The organizational chart demonstrates the Administrative Programs Officer serves as the PREA Compliance Manager.

Through such reviews of access to PREA education information throughout the facility and provided on resident tablets in both English and Spanish, the facility exceeds the standard requirements.

115.212	Contracting with other entities for the confinement of residents
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1477 1312" style="list-style-type: none"> <li data-bbox="280 412 1054 448">1. Community Confinement Corrections Center PAQ <li data-bbox="280 483 1477 519">2. State of Nebraska Service Contract Aware, Scotts Bluff County, dated 7.1.2022 <li data-bbox="280 555 1406 636">3. State of Nebraska Service Contract Award, Hall County Corrections, dated 7.1.2021 <li data-bbox="280 667 1382 748">4. State of Nebraska Service Contract Award, Lincoln County Sheriff, dated 7.1.2021 <li data-bbox="280 779 1374 860">5. State of Nebraska Service Contract Award, Phelps County Sheriff, dated 7.1.2021 <li data-bbox="280 891 1477 972">6. State of Nebraska Service Contract Award, Platte County Sheriff's Department, dated 7.1.2021 <li data-bbox="280 1003 1382 1084">7. State of Nebraska Service Contract Award, Buffalo County Sheriff, dated 7.1.2021 <li data-bbox="280 1115 1398 1196">8. State of Nebraska Service Contract Award, Dawson County Sheriff, dated 7.1.2021 <li data-bbox="280 1227 1406 1308">9. State of Nebraska Service Contract Award, Cherry County, County Sheriff, dated 11.29.2021 <p data-bbox="280 1420 437 1456">Interviews:</p> <ol data-bbox="280 1491 732 1527" style="list-style-type: none"> <li data-bbox="280 1491 732 1527">1. Captain / PREA Coordinator <p data-bbox="280 1563 1437 1644">During the pre-audit phase, the Captain / PREA Coordinator conveyed the agency has privatized contracts.</p> <p data-bbox="280 1747 1453 1827">(a-b) The Community Confinement Corrections Center PAQ states the facility has seven contracts with private agencies for confinement services of their inmates.</p> <p data-bbox="280 1930 1477 2056">The agency provided eight individual contracts for services. Each contract, page 12, section 3. a. Conditions of confinement, I, states, "The County will adopt and comply with all standards under the Prison Rape Elimination Act (PREA) for adult Prisons/</p>

Jails.”

Through such reviews, the facility meets the standard requirements.

115.213	Supervision and monitoring
	<p data-bbox="280 188 1038 221">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="280 266 579 300">Auditor Discussion</p> <p data-bbox="280 344 544 378">Document Review:</p> <ol data-bbox="280 412 1449 748" style="list-style-type: none"><li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ<li data-bbox="280 479 1425 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022<li data-bbox="280 591 1449 669">3. Community Correctional Center-Omaha Annual Review of Staffing Assignment and Video Monitoring, dated 12.2022<li data-bbox="280 703 1035 736">4. Critical Staffing Memorandum, dated 12.17.2022 <p data-bbox="280 860 437 893">Interviews:</p> <ol data-bbox="280 927 1222 1319" style="list-style-type: none"><li data-bbox="280 927 608 960">1. Random Residents<li data-bbox="280 994 612 1028">2. Targeted Residents<li data-bbox="280 1061 743 1095">3. Case Workers and Corporals<li data-bbox="280 1128 1222 1162">4. Administrative Programs Officer I / PREA Compliance Manager<li data-bbox="280 1196 549 1229">5. Acting Warden<li data-bbox="280 1263 453 1296">6. Warden <p data-bbox="280 1352 1469 1476">Interviews with residents demonstrated supervisory staff of all levels were available to them in their living units, when making rounds, through inmate tablets, kites or inmate interview requests.</p> <p data-bbox="280 1576 1458 1700">Interviews with staff demonstrated supervisory staff conduct unannounced rounds, each day, often occurring multiple times per day and each documented those rounds in colored ink in area logbooks.</p> <p data-bbox="280 1800 1469 2013">Interviews with the PREA Compliance Manager, Captain / PREA Coordinator, Acting Warden and Warden demonstrated the staffing plan is completed, in total, annually. The facility Warden stated shift logs are sent to the agency central office each morning. The agency central office will determine if the facility is in need of staffing and deploy staff from different agency facilities before a staff deviation could occur.</p>

Site Observation:

Supervisory staff were observed interacting with resident throughout the onsite review. Female staff were witnessed stating 'Female Staff' before entering resident hallways during the tour. All though not a requirement of Community Confinement facilities logbooks with multiple unannounced round documentation was witnessed in area hallways and the reception desk.

(a) The Community Corrections Center Omaha PAQ states the facility requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents is 176. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents on which the staffing plan was predicated is 179.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 6, section C. PREA Standard Secure Facility 115.13 a-d Community Facility 115.213 Supervision and Monitoring, 1. a-j, states. "Each facility shall comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse/ assault. Each facility shall, in conjunction with the PREA Coordinator, calculate adequate staffing levels and determine the need for video monitoring by taking the following into consideration: Generally accepted detention and correctional practices.

- a. Generally accepted detention and correctional practices.
- b. Any judicial findings of inadequacy.
- c. Any findings of inadequacy from federal investigative agencies.
- d. Any findings of inadequacy from internal or external oversight bodies.
- e. All components of the facility's physical plant, including blind spots or areas where team members or inmates may be isolated.
- f. The composition of the inmate population.
- g. The number and placement of supervisory team member.
- h. Institutional programs occurring on shifts.
- i. Any applicable state or local laws, regulations or standards.
- j. The prevalence of substantiated and unsubstantiated incidents of sexual abuse/ assault and sexual harassment

k. Any other relevant factors. In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations.

In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations.”

The facility provided a Community Correctional Center-Omaha Annual Review of Staffing Assignment and Video Monitoring. The staffing plan documents the following components.

1. Generally accepted adult correctional institution practice.
2. Any judicial findings of inadequacy
3. Any finding of inadequacy from federal investigative bodies.
4. Any findings of inadequacy from internal or external oversight bodies.
5. All components of the program’s physical plant (including “blind spots” or areas where staff and residents may be isolated). Included in this component are grids of camera placement throughout the facility.
6. The composition of resident population. (i.e. - gender ratios, risk/need of residents, physical size, sexual aggressive behaviors (SAB), vulnerability to victimization (VV).
7. The number and placement of supervisory staff of the incarcerated population with minimum staffing levels.
8. Programs occurring on a particular shift.
9. Any applicable State or local laws, regulations or standards.
10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
11. Any other relevant factors.

The staffing plan is signed by the Facility Warden, PREA Compliance Manager and the agency PREA Coordinator on 12.27.2022 and 12.28.2022.

(b) The Community Corrections Center Omaha PAQ states the facility documents each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility stated the most common reason for deviating from the staffing plan in the last 12 months was sick leave.

The facility provided a Critical Staffing Memorandum, Incident Type: Below minimum staffing level. This report is documenting staffing deviations that occurred on a particular shift and the facilities coverage plan at 0700 hours. The report also includes staff positions and or reasons staff were not at the facility due to employee illness.

(c) The Community Corrections Center Omaha PAQ states at least once every year the facility, reviews the staffing plan to see whether adjustments are needed in (1) the staffing plan, (2) prevailing staffing patterns, (3) the deployment of video monitoring systems and other monitoring technologies, or (4) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 7-8, section 3 states, "Each facility shall implement a policy and practice of having intermediate-level and higher-level supervisors conduct and document unannounced rounds, on all shifts, to identify and deter team members from sexual abuse/assault and sexual harassment. Specific expectations are detailed in facility written procedures.

Team members are strictly prohibited from alerting other team members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

On an annual basis each facility compliance manager will complete an annual PREA assessment based on data from the previous calendar year. This assessment will be submitted to the PREA Coordinator on or before February 1st each year."

The facility completes a new staffing plan each year, in the same format as is described in provision (a) of this standard.

Through the interview with the facility Warden regarding the agency central office deploying staff to mitigate staff deviations and documentation of unannounced rounds throughout the facility, the facility exceeds the standard requirements.

115.215	Limits to cross-gender viewing and searches
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1453 972" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 1406 672">3. Nebraska Department of Correctional Services, Searches Pre-Service Study Guide, dated 01.2019 <li data-bbox="280 707 1034 743">4. Sexual Assault Abuse PowerPoint, dated 01.2020 <li data-bbox="280 779 1453 855">5. Nebraska Department of Correctional Services, Staff Training Academy Course Outline, 'Sexual Assault/Abuse, dated 01.2020 <li data-bbox="280 891 1410 967">6. Nebraska Department of Correctional Services Field Training Officer Module Performance Checklist, dated 2.2021 <p data-bbox="280 1079 437 1115">Interviews:</p> <ol data-bbox="280 1151 743 1473" style="list-style-type: none"> <li data-bbox="280 1151 608 1187">1. Random Residents <li data-bbox="280 1223 612 1258">2. Targeted Residents <li data-bbox="280 1294 743 1330">3. Case Workers and Corporals <li data-bbox="280 1366 549 1402">4. Acting Warden <li data-bbox="280 1438 533 1473">5. Agency Head <p data-bbox="280 1509 1481 1711">Interviews with residents demonstrated each had experienced a pat search and or urinalysis at the facility and that those processes were conducted respectfully by all staff. At the same time residents were asked if they felt sexually safe in the program and each replied yes. One targeted resident stated he had disclosed his sexual orientation and he was appreciative of staff keeping that information confidential.</p> <p data-bbox="280 1823 1481 1980">Staff interviewed stated cross-gender searches had been trained annually through annual in-service, in person training. Staff stated they would not conduct searches on transgender residents simply to ascertain the residents' gender. Staff stated they had a transgender in the past who was searched by staff of their choice.</p>

Site Review Observation:

During the tour the auditor was able to view the area where searches and urinalysis testing was conducted. Residents walk through a metal detector and are then escorted to restroom adjacent to the entry way / day room. Residents are taken into the restroom, outside of camera view, with one staff for the search and or urinalysis.

(a) Community Corrections Center Omaha PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their Residents. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of residents. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents were zero. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents that did not involve exigent circumstances or were performed by non-medical staff was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 8, section E. 1., states, "Team members shall not conduct cross-gender safety 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 medical practitioners. All cross-gender safety searches and cross-gender visual body cavity searches will be documented in an Incident Report. The report shall be maintained by the facility PREA Compliance Manager. (ACRS-2C-06)."

(b) This provision is not applicable as the facility does not have female residents.

(b) Community Corrections Center Omaha PAQ states the facility policy does require that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified as cross-gender strip searches and body cavity searches are not allowed. The facility does not house female inmates. Policy compliance can be found in provision (a) of this standard.

(d) Community Corrections Center Omaha PAQ states the facility has implemented policies and procedures that enable residents 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 cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to

announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 8, section E. 3., states, "In order to enable inmates to shower, perform bodily functions and change clothing without nonmedical team members of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks, all team members of the opposite gender will announce their presence when entering an inmate housing unit. Written notice to inmates shall be posted prominently in all units indicating team members of the opposite gender may be present at any time.

It is also necessary to make a verbal announcement when a staff member of the opposite gender is assigned to work on an inmate housing unit or when a staff member of the opposite gender enters an inmate housing unit where inmate sleeping/showering quarters are located. For example, if a female staff member is assigned to a male housing unit for the duration of a shift, an announcement at the beginning of the shift is required in regard to that person's presence. When the female leaves the unit and returns an announcement of a female present must be made upon return to the unit. In addition, any time an opposite gender team member who are not assigned to that unit enters an area of the housing unit where inmate sleeping/showering quarters are located, a verbal announcement of his or her presence must be made. The announcement shall be made in such a manner that is most likely to be heard, such as the intercom system, and shall make it clear that a staff member of the opposite gender has entered the unit (appropriate language includes but is not limited to "A male/female staff member is on the floor/unit."). In the event of exigent circumstances (i.e., a medical emergency, inmate altercation, inmate/team member assault, etc.) the announcement of cross gender team members is not necessary."

(e) The Community Corrections Center Omaha PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Such searches (described in 115.215(e)-1) occurred in the past 12 months was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 9, section E. 4., states, "NDCS shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If an inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records or, if necessary, by learning that information as part of a broader medical examination conducted in

private by a medical practitioner.”

(f) The Community Corrections Center Omaha PAQ states 100% of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs.

The facility provided a Nebraska Department of Correctional Services, Searches Pre-Service Study Guide. The study guide outlines the following:

1. Defining contraband
2. Explain the purpose of searches
3. List the five (5) most common types of searches
4. Describe professional conduct during searches
5. Explain the importance of professional conduct during searches
6. Identify four (4) ways to minimize the possibility of transmission of infectious disease when doing searches
7. List in order the six (6) elements of a search
8. Explain the limitations for cross-gender pat searches
9. Explain the procedure for searching Official Visitors to correctional facilities
10. Demonstrate a Pat Search within 45 seconds
11. Describe when you would modify a Pat Search
12. Define a safety Search and list the three (3) additional elements of a safety search

The facility provided a Nebraska Department of Correctional Services, Policy 203.11 Sexual Assault/Abuse PowerPoint. This PowerPoint Course Overview includes:

- Zero Tolerance
- Prohibited Behaviors
- Prevention, detection and response
- Investigations criminal and administrative

- Reporting methods for staff and Inmates
- Victim Advocate
- Prevention Planning
- Responsive Planning
- Training and Education
- Screening for risk of sexual victimization and abusiveness
- Official response following an inmate report
- Investigations
- Discipline
- Medical and Mental Health Care
- Data Collection and review
- Audits

Nebraska Department of Correctional Services, Staff Training Academy Course Outline, 'Sexual Assault/Abuse includes the following:

- Identify PREA Standards.
- Explain the NDCS zero-tolerance policy and prohibited behaviors.
- Explain how to fulfill staff responsibilities, regarding prevention, detection, reporting and responding to incidents of sexual assault, sexual abuse and sexual harassment.
- Explain the investigation process and discipline.
- Discuss fears of inmate reporting.
- Discuss how to avoid inappropriate relationships with inmates.

Pages 2-5 speak to search procedures.

The facility provided a Nebraska Department of Correctional Services Field Training Officer Module Performance Checklist. Once complete, the employee and Field Training Officer attest to the following: "I certify that proficiency was demonstrated by the above trained concerning this task on ____."

	Through such reviews, the facility meets the standards requirements.
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115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 3. Nebraska Department of Correctional Services, ADA - Inmates and the Public Policy 004.01, dated 10.31.2021 4. Nebraska Department of Correctional Services, Sexual Assault Awareness Brochure, dated 2.1.2022 (English and Spanish) 5. State of Nebraska Service Contract Amendment, Language Line Services Inc., dated 11.4.2022 - 11.4.2023 6. Zero Tolerance for Sexual Abuse and Sexual Harassment flyers, English and Spanish, not dated 7. Nebraska Department of Correctional Services, Sexual Assault Awareness Brochure, Spanish, dated 2.1.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Targeted Residents 2. Case Workers and Corporals 3. Unit Case Worker <p>Interviews demonstrated the facility had targeted residents who were physically and cognitively disabled. The residents were aware of the agency PREA policy, how to report allegations of sexual harassment and sexual abuse through options of calling hotline numbers posted on facility flyers, through grievances or telling staff.</p> <p>Interviews with staff demonstrated residents are not used for translation services. Staff were aware they would use another staff to translate, or Language Line services found the facility public drive.</p>

The interview with Unit Case Worker demonstrated he provides all residents with PREA education in English and Spanish within 72 hours of intake, typically the day of intake and again within seven days.

Site Observation:

Zero Tolerance flyers were witnessed throughout the facility in both in English and Spanish and on resident tablets.

(a) The Community Corrections Center Omaha PAQ states the agency has established procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10, section F. 1-2., state,

1. "Information will be provided in formats accessible to all inmates, including those who are deaf or hard of hearing, visually impaired or otherwise disabled; those who have intellectual, psychiatric or speech disabilities; as well as to inmates who have limited reading skills and who are limited English proficient. (This provision is also listed in PREA Standard secure facility 115.33 / community facility 115.233 Inmate Education.) (ACI-3D-09).

2. Reasonable steps will be taken to ensure meaningful access to information is provided to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. Reliance will not be placed on inmate interpreters, inmate readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. (ACI-3D09)"

Nebraska Department of Correctional Services, ADA - Inmates and the Public Policy 004.01, page, 1, section PURPOSE, states, "To provide the Nebraska Department of Correctional Services (NDCS) with policies that support and implement the provisions of Title II of the Americans with Disabilities Act (ADA) as Amended in 2008 and the Rehabilitation Act of 1973. To define those policies and establish the process for requesting reasonable modifications, team member's responsibilities, and request procedures as they apply to the incarcerated population and members of the public. (ACI-1C-07)

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10, section F. PREA Standards Secure Facility 115.16 a-c/Community Confinement 115.216 a-c Inmates with Disabilities and Inmates who are Limited English Proficient, 1., states, "Information will be provided in formats accessible to all inmates, including those who are deaf or hard of hearing, visually impaired or otherwise disabled; those who have intellectual, psychiatric or speech disabilities; as well as to inmates who have limited reading skills and who are limited English proficient. (This provision is also listed in PREA Standard secure facility 115.33 / community facility 115.233 Inmate Education.) (ACI-3D-09)."

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section M. PREA Standard Secure Facility 115.33 a-f / Community Facility 115.233 a-f Inmate Education, 3., states, "information will be provided in format accessible to all inmates, including those who are deaf or hard of hearing, visually impaired or otherwise disabled: those who have intellectual, psychiatric or speech disabilities as well as to inmates who have limited reading skills and who are limited English proficient. (ACI-3D-09)."

The facility provided Nebraska Department of Correctional Services, Sexual Assault Awareness Brochures in Spanish. The brochure includes the following:

- The Department's Policy on Sexual Activity
- Staff-On-Inmate Sexual Behavior
- Inmate-On-Inmate or Inmate-On-Staff Sexual Behavior
- If you are sexually assaulted
- Self Protection
- Nebraska State Statute
- PREA Hotline - PIN 0-111-111-111 / speed dial 08#

The facility provided a Zero Tolerance for Sexual Abuse and Sexual Harassment flyer, in English and Spanish. The flyer provides reporting options externally and internally with dialing instruction from incarcerated individual phones.

(b) The Community Corrections Center Omaha PAQ states the agency has established procedures to provide residents with limited English proficiency equal

opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations. If YES, the agency or facility documents the limited circumstances in individual cases where resident interpreters, readers, or other types of resident assistants are used. In the past 12 months, the number of instances where resident interpreters, readers, or other types of resident assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under § 115.264, or the investigation of the resident's allegations was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10, section F. PREA Standards Secure Facility 115.16 a-c/Community Confinement 115.216 a-c Inmates with Disabilities and Inmates who are Limited English Proficient, 2., states, "Reasonable steps will be taken to ensure meaningful access to information is provided to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. Reliance will not be placed on inmate interpreters, inmate readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. (ACI-3D09)"

The facility provided a State of Nebraska Service Contract Amendment, Language Line Services Inc. Page 1 of the contract states, "Contract to supply and deliver On-Demand Remote Interpreting (OPI and VRI) through the NASPO ValuePoint, a cooperative purchasing program, a division of the National Association of State Procurement Officials, to State of Nebraska agencies for the period November 4, 2022, and November 3, 2023."

Through such reviews, the facility meets the standard requirements.

115.217	Hiring and promotion decisions
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1449 1003" style="list-style-type: none"> <li data-bbox="280 412 959 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 564">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 600 1449 680">3. Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, dated 8.31.2022 <li data-bbox="280 716 1390 797">4. Nebraska Department of Correctional Services, Teletype Operations Policy 010.06, dated 11.30.2021 <li data-bbox="280 833 879 869">5. Reference Check form, dated 11.2013 <li data-bbox="280 904 1318 940">6. Employment Reference Check (by another agency), dated 1.26.2022 <li data-bbox="280 976 1134 1012">7. Post Audit: Institutional Reference Checks (screenshots) <p data-bbox="280 1111 437 1146">Interviews:</p> <ol data-bbox="280 1182 895 1218" style="list-style-type: none"> <li data-bbox="280 1182 895 1218">1. Human Resource Generalist Assistant I <p data-bbox="280 1254 1461 1496">The interview with the Human Resource Generalist demonstrated criminal background checks are completed upon hire, promotion and annually thereafter. Applicants answer administrative adjudication questions during the application and interview processes. Institutional reference checks are completed for applicable applicants and information on employee involvement in sexual abuse allegations is shared with institutional employers.</p> <p data-bbox="280 1603 636 1639">Site Review Observation:</p> <p data-bbox="280 1675 1477 2087">Utilizing the PREA Audit - Community Confinement Documentation Review Employee Files/Records template of 28 staff demonstrated each had current criminal background checks on file, administrative adjudication questions had been asked before hire and again upon promotion. Of the 28 files reviewed the agency was unable to ascertain if four employees required an institutional reference check. Post audit, the facility provided a screen shot demonstrating two past employees were rehired where an institutional reference check was not required, and an email demonstrating a recruitment file could not be located after an extensive search. The PREA Auditor for the agency can attest to the agency demonstrating reference checks are completed on a large percentage of employees and this instance is an</p>

anomaly.

(a) The Community Corrections Center Omaha PAQ states agency policy prohibits hiring or promoting anyone who may have contact with residents and prohibits enlisting the services of any contractor who may have contact with residents who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10, section G. PREA Standard Secured Facility 115.17 a-g / Community Facility 115.217 a-g Hiring and Promotion Decisions, states, " NDCS shall not hire, promote or enlist the services of any contractor who may have contact with inmates who has engaged in sexual/assault in a prison, jail, lockup, community confinement facility, juvenile facility or other institution; who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion or if the victim did not consent or was unable to consent; and/or who has been civilly or administratively adjudicated to have engaged in such activity. Any incidents of sexual harassment will be taken into consideration. Refer to Policy 112.03, Team Member Selection Policy, for additional details regarding the hiring and promoting processes."

(b) The Community Corrections Center Omaha PAQ states agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months, the number of persons hired who may have contact with residents who have had criminal background record checks is nine.

Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, page 6, section 6. Ex-team member Application/Criminal Histories b. second paragraph, states, "The site HR contact will initiate the criminal history review through the established centralized security check process after interviews are conducted. Central Office Human Resources will make decisions if the individual should be considered for employment. If approval is given for consideration, the applicant shall go through the established selection process. Hiring decisions regarding people who served a sentence of conviction in the Nebraska Department of Correctional Services will be reviewed with the Director/designee."

Page 12, section F. Employment Reference Checks and Security Checks, 1., states, "The hiring manager or designee will conduct work reference checks on the top candidates being considered for the position. Reference checks will be conducted from the most recent work experience(s). Recent is defined as within the last five years.

Regardless of employment record, if the candidate has worked for a Nebraska State Agency, current or previous, a reference check will be conducted with the State Agency.

Regardless of employment record, if the candidate has worked for an institutional employer (county jail, prison, school, hospital, military, etc.), current or previous, a reference check will be conducted with the institutional employer.

All attempts to contact an employment reference shall be documented in writing for the hiring packet."

The facility provided a Nebraska Department of Correctional Services, Reference Check Form. Page 2 of the form includes the following questions:

1. Has the candidate engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility or other institutions?
2. Has the candidate ever been convicted of engaging or attempting to engage in sexual activity in the community facility by force, overt, or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?
3. Has the candidate ever been civilly or administratively adjudicated to have engaged in the activity described in question 14 or 15?

4. Has the candidate ever had substantiated allegations of sexual harassment made against him/her in a prison, jail, lockup, community confinement facility, juvenile facility or other institution?

5. Has the candidate ever had substantiated allegations of sexual harassment made against him/her in the community?

(d) The Community Corrections Center Omaha PAQ states the agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with residents. In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents is six.

Nebraska Department of Correctional Services, Teletype Operations Policy, page 7, section XX Background Checks, states, "All persons entering NDCS facilities, including any employee/volunteer/contractor or visitor are subject to a background investigation including but not limited to criminal history (Attachment D), driving record, and wanted person files. In addition, inquiries may include checking intelligence files, NCJIS, inmate telephone and visiting records, and conducting follow-up interviews."

(e) The Community Corrections Center Omaha PAQ states the agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with residents or that a system is in place for otherwise capturing such information for current employees.

(f) Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, page 13-14, section 3. a.-d., states, "NDCS shall not hire or promote anyone who:

a. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;

b. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or

c. Has been civilly or administratively adjudicated to have engaged in the activity described in F. 3. A. or b. above;

d. Material omissions regarding such misconduct, or the provision of materially

false information, shall be grounds for termination.

(g) The Community Corrections Center Omaha PAQ states agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, page 14, section 3. d., states, "Material omissions regarding such misconduct, or the provision of materially false information, shall be ground for termination."

(h) The facility provided an Employment Reference Check (by other agency). The document demonstrates the facility answers Administrative Adjudication questions for other institutional employers.

Through such reviews, the facility meets the standard requirements.

115.218	Upgrades to facilities and technology
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 3. Nebraska Department of Correctional Services Material Request for Purchase 4. Facility Camera Map <p>Interviews:</p> <ol style="list-style-type: none"> 1. Acting Warden 2. Deputy Director of Prisons <p>The interview with administrative staff demonstrated the facility had added and increased the number of cameras since the last audit cycle; however, major facility modifications have not taken place.</p> <p>(a) The Community Corrections Center Omaha PAQ states the agency has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p> <p>(b) The Community Corrections Center Omaha PAQ states, the agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later. The PAQ states, "July 2021." The Issue Log states, "The camera was installed to cover blind spots and to help monitor staff and inmate interactions."</p> <p>The facility provided purchase requests demonstrating three cameras have been installed since the last audit cycle.</p> <p>The facility provided a facility camera map. The map designates cameras 40-44 as</p>

being newly installed cameras.

Through such reviews, the facility meets the standard requirements.

115.221	Evidence protocol and forensic medical examinations
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1457 1081" style="list-style-type: none"> <li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1425 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 1457 669">3. Nebraska Medical Sexual Assault Protocol, Nebraska Attorney General's Office, dated 7.2019 <li data-bbox="280 707 1382 781">4. Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment, not dated <li data-bbox="280 819 1445 896">5. Nebraska Department of Correctional Services Memorandum, RE: Community Hospital MOU 115.21, dated 12.12.2022 <li data-bbox="280 934 1414 1010">6. Nebraska Department of Correctional Services Memorandum, RD: Standard 115.53 C-4 Advocacy Attempts, dated 11.22.2022 <li data-bbox="280 1048 834 1081">7. Nebraska Revised Statute 81-2005 <p data-bbox="280 1196 437 1229">Interviews:</p> <ol data-bbox="280 1267 754 1373" style="list-style-type: none"> <li data-bbox="280 1267 754 1301">1. Contracted Registered Nurse <li data-bbox="280 1339 754 1373">2. Associate Director of Nursing <p data-bbox="280 1411 1420 1485">Interviews medical personnel demonstrated the facility would use the Methodist Hospital for forensic exams.</p> <p data-bbox="280 1599 636 1632">Site Review Observation:</p> <p data-bbox="280 1671 1398 1744">The facility has not experienced a sexual assault allegation or had a need for a forensic medical exam in the past 12 months.</p> <p data-bbox="280 1850 1473 2056">(a) The Community Corrections Center Omaha PAQ states the agency/facility is responsible for conducting administrative sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The agency/facility is not responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The Nebraska State</p>

Patrol is responsible for conducting sexual abuse investigations.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10-11, section I. PREA Standard Secured Facility 115.21 a-h / Community Facility 115.221 a-h Evidence Protocol and Forensic Medical Examinations, states, "A forensic examination shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. This person shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. The facility will document efforts to provide SAFEs or SANEs on the Facility Checklist for Incidents of Sexual Assault/Abuse (Attachment E).

In the event that an inmate is sent to the community hospital for a SANE examination, the facility Shift Supervisor will ask the inmate if they would like a victim advocate present at the hospital for support through the SANE examination. If the inmate indicates that they would like a victim advocate present, the facility Shift Supervisor will notify the hospital that a victim advocate was requested and will document on the Facility Checklist for Incidents of Sexual Assault/Abuse (Attachment E). The hospital will contact an advocate from a rape crisis center to be present. If an advocate is not available to provide victim advocate services, the facility shall make available a qualified individual from a community-based organization or qualified agency team member. This person shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual abuse/assault and forensic examination issues in general.

As requested by the victim, the victim advocate, qualified agency team member or qualified community-based organization staff member shall accompany and support the victim through the forensic examination process and investigatory interviews and shall provide emotional support, crisis intervention information and referrals.

If requested by the victim, he or she will be allowed to contact his or her emergency contact or an immediate family member via a team member assisted telephone call. The team member assisted call shall be no longer than 15 minutes in duration. Team members will document the call, or attempted call, on an Incident Report."

(b) The Community Corrections Center Omaha PAQ states the protocol being developmentally appropriate is not developmentally appropriate for youth as the

facility does not house youthful offenders. The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

The facility provided the Nebraska Medical Sexual Assault Protocol, Nebraska Attorney General's Office. This protocol demonstrates the Nebraska Revised Statute 84-218 requires the Attorney General to develop and distribute a statewide model anonymous reporting protocol for use by health care providers as provided in Neb. Rev. Stat. 28-902.

(c) The Community Corrections Center Omaha PAQ states the facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations. The facility documents efforts to provide SANEs or SAFEs. The number of forensic medical exams conducted during the past 12 months is zero. The number of SANEs/SAFEs during the past 12 months was zero. The number of exams performed by a qualified medical practitioner during the past 12 months was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 20-21, section Z., PREA Standard 115.64 / Community Facility 115.264 Staff First Responder Duties, 1., b., states, "Inmate victims of sexual assault or inmates alleging they are victims of sexual assault which occurred within the past 120 hours will be referred immediately, under appropriate security provisions, to a Community Hospital for initial treatment and gathering of evidence without financial cost to the inmate. All forensic examinations shall be at a community hospital. If it is determined a forensic examination will be conducted Department medical staff may provide only emergency medical care prior to transport."

The facility provided a Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment. The checklist demonstrates the following information is documented and or directives are followed upon an allegation of sexual assault, sexual abuse and or sexual harassment.

- Date facility incident occurred/date and time reported/date and time of incident

- First staff on Scene with title Means of Discovery/

the PREA Auditor, stating, "On July 8th, 2022, NDCS signed a Memorandum of understanding with the Women's Center for Advancement. ON February 10, 2022, NDCS received a letter from the Women's Center for Advancement. Stating WCA is terminating the MOU effective March 22, 2022.

- On March 29, 2022, The NDCS Captain / PREA Coordinator reached out to bridge from violence to attempt to enter into an MOU for advocacy care.
- On July 16, 2022, The NDCS Captain / PREA Coordinator reached out to YWCA to attempt to enter into an MOU for advocacy care.
- On September 28, 2022, The NDCS Captain / PREA Coordinator reached out to The Trevor Project to attempt to enter into an MOU for advocacy care.
- On September 28, 2022, The NDCS Captain / PREA Coordinator reached out to encourage advocacy to attempt to enter into an MOU for advocacy care.
 - o Encourage was interested had a zoom meeting on October 28, 2022
 - o Sent MOU example on 11-8-2022"

(e) The Community Corrections Center Omaha PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

(f) The Community Corrections Center Omaha PAQ states if the agency is not responsible for investigating allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.221 (a) through (e) of the standard.

(g) The agency provided Nebraska Revised Statute 81-2005. This statute demonstrates the Nebraska State Patrol's commitment to investigating sexual abuse allegations within their confinement facilities. Section (3) states the following, "To make arrests upon view and without warrant for any violation committed in their presence of any provision of the laws of the state relating to misdemeanors or felonies, if and when designated or called upon to do as provided by law."

Through such reviews, the facility meets the standard requirements.

115.222	Policies to ensure referrals of allegations for investigations
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1426 557" style="list-style-type: none"> <li data-bbox="280 412 959 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 669 437 703">Interviews:</p> <ol data-bbox="280 741 552 775" style="list-style-type: none"> <li data-bbox="280 741 552 775">1. Acting Warden <p data-bbox="280 813 1477 927">The interview with the investigator demonstrated upon receiving information, suspicion or receipt of any type of allegation, he would investigate all administrative investigations and refer all sexual abuse allegations to the Nebraska State Patrol.</p> <p data-bbox="280 1039 636 1072">Site Review Observation:</p> <p data-bbox="280 1111 1473 1184">The facility has not experienced a sexual harassment or sexual abuse in the past 12 months.</p> <p data-bbox="280 1296 1477 1541">(a) The Community Corrections Center Omaha PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had four allegations of sexual abuse and sexual harassment that was received. Three allegations resulted in administrative investigations, and one resulted in a criminal investigation. The facility has two allegations pending at the time of this PAQ.</p> <p data-bbox="280 1653 1477 1897">(b/c) The Community Corrections Center Omaha PAQ states the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. The agency policy can be found at Search NDCS - Nebraska Department of Correctional Services</p> <p data-bbox="280 2009 1477 2083">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 11, section J. PREA Standard Secure Facility 115.22 a-e / Community Facility</p>

115.222 a-e Policies to Ensure Referrals of Allegations for Investigations, states, "NDCS shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse/assault and sexual harassment, including third party and anonymous reports, in a prompt, thorough and objective manner. Any outside entities responsible for conducting administrative or criminal investigations of sexual abuse/assault and sexual harassment shall have in place a policy governing the conduct of such investigations that complies with PREA standards and shall provide training pertaining to the investigation of sexual abuse/assault and sexual harassment in confinement settings to the agents and investigators who conduct such investigations. When outside agencies investigate sexual abuse/assault and sexual harassment, NDCS shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation."

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section EE. PREA Standard Secure Facility 115.71 a-1 / Community Facility 115.271 a-1 Criminal and Administrative Agency Investigations, 2. states, "If the allegation appears to be criminal in nature the PREA Coordinator will consult with the Investigation Coordinator for assignment to NDCS Criminal investigators and or the Nebraska State Patrol. Where sexual assault or sexual abuse is alleged by a Team Member refer to policy 215.01. If referred back to the facility to investigate, investigators who have received special training in sexual assault and abuse investigations will be utilized. the PREA Coordinator will notify the facility PREA Compliance Manager and assign the investigation a case number in the Investigator's Case Management Data Base. The case number will be given to the facility PREA Compliance Manager so he or she can keep track of the investigation. The PREA Compliance manager will meet with the victim and inform them of the open investigation and if the staff member or inmate has been reassigned to a different unit. Once completed, the investigation will be sent to the PREA Coordinator for review and appropriate action. If during the institutional investigation it is determined a crime has been committed, the investigation will stop the investigation and contact the PREA Coordinator, and the Investigation Coordinator will be immediately notified."

(d-e) This standard is not applicable as the facility completes Administrative Investigations and the Nebraska State Patrol is responsible for conducting Criminal Investigations.

Through such reviews, the facility meets the standard requirements.

115.231	Employee training
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1474 1310" style="list-style-type: none"> <li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 1406 669">3. Nebraska Department of Correctional Services, Searches Pre-Service Study Guide, dated 01.2019 <li data-bbox="280 707 1034 741">4. Sexual Assault Abuse PowerPoint, dated 01.2020 <li data-bbox="280 779 1453 853">5. Nebraska Department of Correctional Services, Staff Training Academy Course Outline, 'Sexual Assault/Abuse, dated 01.2020 <li data-bbox="280 891 1474 1010">6. Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, Training Acknowledgment, not dated <li data-bbox="280 1048 1417 1122">7. Email Correspondence, to: Agency PREA Compliance Managers, RE: January PREA Refresher Information, dated 1.25.2023 <li data-bbox="280 1160 1474 1234">8. Nebraska Dept. of Correctional Services, PREA Refresher: Prisons and Jails PREA Basics Curriculum, dated 5.2013 <li data-bbox="280 1272 943 1305">9. NDCS IN2223 Online In-service Curriculum <p data-bbox="280 1420 437 1453">Interviews:</p> <ol data-bbox="280 1491 732 1671" style="list-style-type: none"> <li data-bbox="280 1491 699 1525">1. Case Workers / Corporals <li data-bbox="280 1563 580 1597">2. Specialized Staff <li data-bbox="280 1635 732 1668">3. Captain / PREA Coordinator <p data-bbox="280 1709 1474 1865">Interviews with all staff interviewed demonstrated each received PREA training upon hire, throughout each year through refreshers and as an annual requirement in in-service training. Staff were able to articulate training on the agency zero tolerance policy, rights, reporting responsibilities, searches, and investigations.</p> <p data-bbox="280 1980 528 2013">Site Observation:</p> <p data-bbox="280 2051 1326 2085">Review of the 28 personnel files demonstrated each staff interviewed had</p>

completed PREA training upon hire, annually thereafter, until COVID when the agency moved trainings to every 18 months to mitigate contact. The agency has since rescheduled in-service trainings to be conducted annually as of 1.2024. In the meantime, the Captain / PREA Coordinator has implemented monthly PREA refresher trainings to ensure refresher trainings are completed in the current year of 2023.

(a) The Community Corrections Center Omaha PAQ states the agency trains all employees who may have contact with residents on the agency's zero-tolerance policy for sexual abuse and sexual harassment.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 11-12, section K. PREA Standard Secure Facility 115.31 a-d / Community Facility 115.231 a-d Employee Training, 1-2, state, “

1. Staff Training and Development will offer training (both pre-service and in-service classes) for all team members who may have contact with inmates based on the contents of this Policy and its attachments. Lesson plans will be based on this policy and its attachments and the federal PREA standards and any subsequent revisions thereof.

2. Pre-service and In-service team member training will consist of the following and will include gender specific approaches to working with male and female inmates:

- a. Zero-tolerance for sexual abuse/assault and sexual harassment.
- b. Fulfilling responsibilities with regard to prevention, detection, reporting and response policies and procedures for sexual abuse/assault and sexual harassment.
- c. Inmates' right to be free from sexual abuse/assault and sexual harassment.
- d. Inmates' and staffs' rights to be free from retaliation for reporting sexual abuse/assault and sexual harassment.
- e. Dynamics of sexual abuse/assault and sexual harassment in confinement.
- f. Common reactions of sexual abuse/assault and sexual harassment victims.
- g. Detecting and responding to signs of threatened and actual sexual abuse/assault and sexual harassment.
- h. Avoiding inappropriate relationships with inmates including sexual abuse/assault and sexual harassment.

- i. Communicating effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, and gender nonconforming inmates about sexual abuse/assault and sexual harassment.
- j. Complying with relevant laws related to mandatory reporting of sexual abuse/assault to outside authorities.
- k. Conducting cross-gender pat searches (male staff will only pat search female inmates in exigent circumstances) and searches of transgender and intersex inmates in a professional and respectful manner, and in the possible, consistent with security needs (Preservice and as needed)."

The facility provided a Nebraska Department of Correctional Services, Sexual Assault/Abuse PREA Training PowerPoint. The fifth slide states, "The Nebraska Department of Correctional Services has a Zero Tolerance policy regarding sexual assault, sexual abuse, sexual harassment and retaliation for reporting such incidents. Inmates have the right to be free from Sexual Abuse, Sexual Assault and Sexual Harassment. Inmates and Staff have the right to be free from retaliation for reporting Sexual Abuse, Sexual Assault and Sexual Harassment."

In total, the PowerPoint Course Overview includes the following:

- PREA Standards
- Zero Tolerance
- Prohibited Behaviors
- Prevention, detection, reporting and response
- Reporting methods for staff and Inmates
- Avoiding inappropriate relationships with inmates
- Prevention Planning
- Responsive Planning
- Training and Education
- Screening for risk of sexual victimization and abusiveness
- Reporting methods
- Official response following an inmate report
- Investigations
- Discipline

- Medical and Mental Health Care
- Data collection and review
- Audits

The facility provided a Nebraska Department of Correctional Services, Sexual Assault/Abuse Pre-Service - Study Guide. The Study Guide includes the following topics:

- Zero Tolerance
- Prohibited Behaviors
- Prevention
- Detection
- Reporting methods for staff
- Investigations
- Fears of Reporting
- Reporting methods for inmates
- Advocacy
- All staff have a duty to prevent and report incidents of sexual assault/abuse or retaliation

(b) The Community Corrections Center Omaha PAQ states training is tailored to the gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements monthly.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 12, section 3, states, "NDCS will provide In-service training every year to ensure all team members know the current sexual abuse/assault and sexual

harassment policies and procedures. Refresher information on current sexual abuse/ assault and sexual harassment policies will be provided as needed.”

The facility provided a Nebraska Department of Correctional Services, Sexual Assault/Abuse PREA Online In-Service Staff Training Academy Course Outline.

Objectives: Upon completion of this course, participants will be able to:

- Identify the focus of PREA Standards.
- Discuss Nebraska Statutes definitions.
- Explain the NDCS zero-tolerance policy and prohibited behaviors.
- Explain how to fulfill staff responsibilities, regarding prevention, detection, reporting and responding to incidents of sexual assault, sexual abuse and sexual harassment.
- Explain the investigation process and discipline.
- Discuss sexual abuse in confinement settings, including common reactions of victims and inmate reporting.
- Discuss how to avoid inappropriate relationships with inmates.
- Discuss the responsibilities of the Nebraska Coalition to End Sexual Assault and Domestic Violence.
- Explain the Nebraska Statewide Coordination Response Team’s mission.

The facility provided an Email Correspondence, to: Agency PREA Compliance Managers, RE: January PREA Refresher Information. The email the January 2023 PREA Refresher – PREA Basics training for the agency. The email states, “Please take a moment to review the attached information. This information is to help team members be more aware of sexual assault, sexual abuse and sexual harassment within the population we serve. If you have any questions, you can contact your facility PREA Compliance Manager or the Agency PREA Coordinator. Below is a list of the facility compliance Managers.” The Community Corrections Center Omaha facility PREA Compliance Manager is included in the list of PREA Compliance Managers.

The facility provided Nebraska Dept. of Correctional Services, PREA Refresher: Prisons and Jails PREA Basics Curriculum. The curriculum consists of the following:

- Zero Tolerance Policy
- Dynamics of Sexual Abuse in Detention

- Detecting Signs of Sexual Abuse

(d) The Community Corrections Center Omaha PAQ states the agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section 4, states, "Pre-Service and In-Service training shall be documented, with the team member's signature indicating understanding of the training received.

The facility provided a sample Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, training acknowledgment, dated by employee on 11.8.2021. The first paragraph of this acknowledgment states, "The Nebraska Department of Correctional Service has a ZERO TOLERANCE standard for sexual abuse, sexual harassment and retaliation for reporting such incidents in its prisons, community corrections facilities and parole. The intent of PREA is to ensure a safe, humane and appropriately secure environment, free from all forms of sexual abuse for all inmates. You have an obligation to maintain clear boundaries with inmates and to establish a relation of authority, objectivity and professionalism, you must not allow the development of personal, unduly familiar, emotional or sexual relationships to occur with inmates. Please remember that any sexual contact between an inmate and staff, volunteers or contractors, including kissing, is considered a form of sexual abuse."

Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, training acknowledgment, third paragraph, states, "YOU HAVE A DUTY TO REPORT. Reporting methods include but are not limited to:

- Supervisor
- Facility PREA Compliance Manager
- Warden
- PREA Coordinator (402.479.5660)
- Department Investigator
- Privately via PREA Hotline (855.623.7360)"

The last paragraph of the acknowledgment states, "I acknowledge that I have been trained on and understand the Prison Rape Elimination Act, NDCS policy and procedures and the Department's zero tolerance standard for all forms of sexual abuse. I also acknowledge that I will report any findings of sexual abuse immediately."

The facility provided a NDCS IN2223 Online In-service Curriculum. Education components include the following.

- NDCS IN2223 Online Directions and Pre-Acknowledgments
- NDCS IN2223 Sexual Assault / Abuse PowerPoint
- NDCS IN2223 Policy 203.11 Sexual Assault/Abuse
- NDCS Policy 203.11 Attachment A - IN2223
- NDCS Policy 203.11 Attachment B - IN2223
- NDCS Policy 203.11 Attachment G - IN2223
- NDCS Policy 203.11 Attachment H 0 IN2223

Through such reviews, the facility meets the standard requirements.

115.232	Volunteer and contractor training
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1477 943" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 562">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 598 1461 676">3. Nebraska Department of Correctional Services, Community Partner Orientation PowerPoint, dated 2.2021 <li data-bbox="280 712 1321 790">4. Nebraska Department of Correctional Services, Volunteer Orientation Handbook, dated 2.2018 <li data-bbox="280 826 1477 943">5. Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, Training Acknowledgment, not dated <p data-bbox="280 1050 437 1086">Interviews:</p> <ol data-bbox="280 1122 1206 1227" style="list-style-type: none"> <li data-bbox="280 1122 751 1158">1. Contracted Registered Nurse <li data-bbox="280 1193 1206 1229">2. Administrative Program Officer I / PREA Compliance Manager <p data-bbox="280 1263 1441 1384">The interview with the contractor demonstrated she had a clear understanding of the agency zero tolerance policy for sexual harassment and sexual abuse, how to report allegations she may have received from inmates or witnessed on her own.</p> <p data-bbox="280 1491 1469 1653">The interview with the Administrative Program Officer demonstrated the facility has four contractors and does not utilize volunteers. Each contractor is trained on the Agency PREA policy, reporting requirements, and non-contact with residents through the agency central office.</p> <p data-bbox="280 1760 528 1796">Site Observation:</p> <p data-bbox="280 1832 1452 1910">Review of one contractor file demonstrated she had acknowledged the completion of PREA training.</p> <p data-bbox="288 2018 1398 2054">(a) The Community Corrections Center Omaha PAQ states all volunteers and</p>

contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The number of volunteers and contractors, who may have contact with residents, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response is six.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section L. PREA Standard Secure Facility 115.32 a-c / Community Facility 115.232 a-c Volunteer and Contractor Training, state,

1. "NDCS shall ensure all volunteers and contractors who have contact with inmates have been trained on their responsibilities regarding policies and procedures on sexual abuse/assault and sexual harassment prevention, detection and response.
2. All volunteers and contractors who have contact with inmates shall be notified of NDCS's zero tolerance policy regarding sexual abuse/assault and sexual harassment and informed how to report such incidents. The level and type of training provided shall be based on the services they provide and level of contact they have with inmates.
3. NDCS shall maintain documentation confirming volunteers and contractors understand the training they have received."

The facility provided a Nebraska Department of Correctional Services, Community Partner Orientation PowerPoint. The purpose of the training is to prepare volunteers and contractors to be successful in the correctional environment. Topics include:

- The eight points of Volunteer Pledge
- The three points of the Volunteer Waiver
- The PREA Agreement
- The 17 topics from the Volunteer Training Record

The facility provided a Medical Contractor Specialized Training Completion Date Spreadsheet. The spreadsheet documents the following information for 16 medical contractors.

- Report Title

- Report Generated By
- Report Generated Date/Time
- Record Count
- Record Count Limit
- Report Source: Nebraska.cscd.com
- User Full Name
- Training Title
- Transcript Completed Date

(b) The Community Corrections Center Omaha PAQ states the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents. All volunteers and contractors who have contact with residents have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Curriculum compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section L. 3., states, "NDCS shall maintain documentation confirming volunteers and contractors understand the training they have received."

The facility provided a Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, Training Acknowledgment. This document is used for staff and contractors and is explained in detail in § 115.31.

Through such reviews, the facility meets the standard requirements.

115.233	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 3. Community Corrections Center - Omaha - Sexual Assault Orientation PowerPoint Presentation, English and Spanish versions 4. Prison Rape Elimination Act Inmate Orientation Information, Inmate Acknowledgement, not dated 5. Community Corrections Center - Omaha: Inmate In-House Rules and General Information Handbook, not dated 6. Post Audit: 14 Inmate Orientation Information Acknowledgments, dated 1.13.2023 7. Post Audit: New Arrival PREA Educational Refresher, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Residents 2. Targeted Residents 3. Unit Case Worker <p>Interviews with the 19 residents demonstrated each understood their knowledge of PREA, reporting options to staff, anonymous reports, reports through the grievance or staff report process, using the hotline, or families.</p> <p>The interview with Unit Case Worker demonstrated he provides all residents with PREA education in English and Spanish within 72 hours of intake, typically the day of intake and again within seven days.</p> <p>Site Observation:</p> <p>Utilizing the PREA Audit - Community Confinement Facilities Documentation Review template for 19 residents demonstrated 15 of 19 residents received PREA education</p>

within 72 hours of intake. The facility was required to train the four residents who had not received the required PREA education. Post audit the facility provided 14 Inmate Orientation Information Acknowledgments demonstrating residents were trained on the required intake PREA education. Post audit the facility provided a New Arrival PREA Educational Refresher to include the Zero Tolerance Policy, defining sexual acts and contacts and consensual acts are not tolerated, sexual acts involving staff, contractors and volunteers and reporting options. The form is signed and dated by the Incarcerated Individual and a CCC-O Team Member.

(a) The Community Corrections Center Omaha PAQ states residents receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The number of residents admitted during past 12 months who were given this information at intake was 189.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section M. PREA Standard Secure Facility 1115.33 a-f / Community Confinement 1115.233 a-f Inmate Education, 1., states, "During the intake process at all NDCS facilities, inmates shall receive information explaining NDCS' zero tolerance policy regarding sexual abuse/assault and sexual harassment, and retaliation for reporting such incidents and how to report incidents or suspicions of sexual abuse/assault or sexual harassment."

(b) The Community Corrections Center Omaha PAQ states the facility provides residents who are transferred from a different community confinement facility with refresher information referenced in 115.233(a)-1. The number of residents transferred from a different community confinement facility during the past 12 months was 19. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was 19. Policy compliance can be found in provision (a) of this standard.

The facility provided a Community Corrections Center - Omaha - Sexual Assault Orientation PowerPoint Presentation, in English and Spanish. The PowerPoint presentation educates incarcerated individual on the following topics.

- Prison Rape Elimination Act
- Nebraska Department of Correctional Services Zero Tolerance policy
- Your Rights

- Prohibited behaviors
- Ways to keep yourself safe
- How to report
- Medical and Mental Health Care
- Investigation Process
- False Reporting
- CCC-O's PREA Compliance Manager

(c) The Community Corrections Center Omaha PAQ states Resident PREA education is available in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled and those who have limited reading skills.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section M. PREA Standard Secure Facility 1115.33 a-f / Community Confinement 1115.233 a-f Inmate Education, 2., states, "Within 30 days of intake, inmates newly assigned to NDCS shall receive comprehensive education through use of a power point/video presentation, with staff available to answer questions, regarding their right to be free from sexual abuse/assault and sexual harassment, their right to be free from retaliation for reporting such incidents and agency policies and procedures for responding to such incidents. This comprehensive education will be conducted at reception intake facilities only."

(d) The Community Corrections Center Omaha PAQ states the agency maintains documentation of resident participation in PREA education sessions.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section M. PREA Standard Secure Facility 1115.33 a-f / Community Confinement 1115.233 a-f Inmate Education, 3., states, "Information will be provided in formats accessible to all inmates, including those who are deaf or hard of hearing, visually impaired or otherwise disabled; those who have intellectual, psychiatric or speech disabilities; as well as to inmates who have limited reading skills and who are limited English proficient."

The facility provided Prison Rape Elimination Act Inmate Orientation Information,

Inmate Acknowledgement. Acknowledgements are signed and dated by incarcerated individuals and a staff witness.

(e) The Community Corrections Center Omaha PAQ states the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section M. 5., states, "Receipt of information at intake, within 30 days and upon transfer to any facility, shall be documented through inmate signature and maintained in the inmate file."

The facility provided a Community Corrections Center - Omaha: Inmate In-House Rules and General Information Handbook. Addendum D in the handbook provides the sexual awareness brochure, explaining reporting procedures and contact information. During the pre-audit phase the facility explained the handbook is available on inmate tablets.

Through such reviews, the facility meets the standard requirements.

115.234	Specialized training: Investigations
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1426 887" style="list-style-type: none"> <li data-bbox="280 412 959 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 1059 629">3. Specialized Investigative Training: PREA, not dated <li data-bbox="280 667 1358 741">4. Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting Instructor Outline, not dated <li data-bbox="280 779 1015 813">5. NDCS - PREA Investigator Training Spreadsheet <li data-bbox="280 851 1374 884">6. Nebraska Department of Correctional Services Certificates of Completion <p data-bbox="280 999 437 1032">Interviews:</p> <ol data-bbox="280 1070 810 1104" style="list-style-type: none"> <li data-bbox="280 1070 810 1104">1. Unit Case Manager / Investigator <p data-bbox="280 1142 1469 1256">Interviews with the Investigator demonstrated she had completed specialized investigator training through the State of Nebraska Central Office investigator basic and specialized training.</p> <p data-bbox="280 1370 528 1404">Site Observation:</p> <p data-bbox="280 1442 1434 1516">Specialized Investigator training certificates from the National Institute of Corrections were uploaded to the online audit system during the pre-audit phase.</p> <p data-bbox="280 1630 1465 1744">(a/b) The Community Corrections Center Omaha PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p> <p data-bbox="280 1859 1481 2054">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section N. PREA Standard Secure Facility 115.34 a-d / Community Facility 115.234 a-d Specialized Training: Investigations 1. states, "In addition to the general training provided to all team members, investigators will receive training in conducting investigations in confinement settings, to include a. Techniques for</p>

interviewing victims of sexual abuse/assault. b. Proper use of Miranda and Garrity warnings. c. Sexual abuse/assault evidence collection in confinement settings. d. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.”

The facility provided Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting PowerPoint. Training curriculum includes:

- Background of PREA
- Investigation basics
- Working with victims
- Trauma informed approach
- Interviewing
- False reports
- Culture
- Practical exercise

The facility provided PREA Instructor Outline for Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting Instructor Outline. This course overview includes:

- PREA Standard 115.21/115.221
- PREA Standard 115.34/115.234
- PREA Standard 115.71/115.271
- PREA Standard 115.72/115.272
- Investigation Basics
- Assignment of Investigation
- Criminal V Administrative
- Basic Investigation Steps
- Initial Response
- Investigation
- Determination of Findings

- Prosecutorial Referral
- Investigative Report Packet
- Working with Victims
- Understanding Victim's Background
- Biological Impact of Trauma
- Trauma's Effect on Brain
- Immediate Reaction
- Being Very Impressive
- Remaining Controlled, Numb
- Associated Problems
- Short-Term Aftermath
- Long-Term Aftermath
- Confinement Setting Aftermath Issues
- Additional Male Aftermath Issues
- Additional Female Aftermath Issues
- PTSD
- Trauma Informed Approach
- Avoid Additional Harm
- Avoid Secondary Harm
- Delayed Reporting
- Delayed Reporting in Youth
- Hesitant Victims
- Staff Aggressors
- Interviewing
- Personal Biases
- Managing Biases
- Initial Interviewing
- Soft Interviewing

- Hard Interviewing
- Communication: Female Inmates/Male Inmates/Minority Populations
- Hostile or Uncooperative Victims
- When to Interview Victim
- Negative Effects of Repeated Interviews
- Handling False Reports
- False Reports
- Sexualized Work Environment
- Signs of Sexual Abuse Perpetrated by Inmates
- Staff Sexual Misconduct
- Red Flags of Sexual Abuse Perpetrated by Staff
- Red Flags Exhibited by Staff
- Influences of Reporting Culture
- Reporting
- Inmate Code of Silence
- Staff Code of Silence
- Strategies for Changing Culture
- Investigators Influence

(c) The Community Corrections Center Omaha PAQ states the agency maintains documentation showing that investigators have completed the required training. The number of investigators currently employed who have completed the required training is four.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section N. PREA Standard Secure Facility 115.34 a-d / Community Facility 115.234 a-d Specialized Training: Investigations, 2., states, "NDCS shall maintain documentation confirming investigators have received specialized training in conducting sexual abuse/assault investigations."

The agency provided a NDCS - PREA Investigator Training Spreadsheet demonstrating the agency has 128 employees who have completed specialized training for investigators.

The facility provided two Nebraska Department of Correctional Services Certificates of Completion for PREA Investigator Training.

Through such reviews the facility meets the standard requirements.

115.235	Specialized training: Medical and mental health care
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1474 860" style="list-style-type: none"> <li data-bbox="280 412 959 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 564">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 600 1334 680">3. Prison Rape Elimination Act NDCS Director of Nursing Medical Training Curriculum, not dated <li data-bbox="280 716 812 752">4. Medical PREA Completion Record <li data-bbox="280 788 1474 860">5. Post Audit: Nine National PREA Resource Center Specialized Medical and Mental Health Training Certificates <p data-bbox="280 967 437 1003">Interviews:</p> <ol data-bbox="280 1039 756 1146" style="list-style-type: none"> <li data-bbox="280 1039 756 1075">1. Contracted Registered Nurse <li data-bbox="280 1111 756 1146">2. Associate Director of Nursing <p data-bbox="280 1182 1461 1344">The interview with medical staff demonstrated each had not completed specialized training for medical and mental health staff. Post audit the facility provided nine National PREA Resource Center Specialized Medical and Mental Health Training Certificates</p> <p data-bbox="280 1451 1455 1738">(a) The Community Corrections Center Omaha PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The number of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is 20. The percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is 100%.</p> <p data-bbox="280 1845 1455 2051">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy, page 14, section O PREA Standard Secure Facility 115.35 a-d / Community Facility 115.235 a-d Specialized Training: Medical and Mental Health 1., states, "All full and part-time medical and mental health care practitioners will receive training in the following:</p>

- a. Detecting and assessing signs of sexual abuse/assault and sexual harassment.
- b. Preserving physical evidence of sexual abuse/assault.
- c. Responding effectively and professionally to victims of sexual abuse/assault and sexual harassment.
- d. Reporting allegations or suspicions of sexual abuse/assault or sexual harassment.”

The facility provided a Prison Rape Elimination Act NDCS Director of Nursing Medical Training Curriculum. The curriculum goals are to:

- Detect and assess signs of sexual abuse and sexual harassment
- Preserving physical evidence of sexual abuse
- Responding effectively and professionally to victims of sexual abuse and sexual harassment
- Reporting allegations or suspicions of sexual abuse or sexual harassment

(b) Community Corrections Center Omaha PAQ states the agency medical staff at this facility do not conduct forensic medical exams. The PAQ states, “all inmates will be taken to the Women’s Methodist Hospital.”

(b) The Community Corrections Center Omaha PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy, page 14, section O PREA Standard Secure Facility 115.35 a-d / Community Facility 115.235 a-d Specialized Training: Medical and Mental Health 3., state,

1. “Medical and mental health practitioners shall receive the applicable training mandated for team members or contractors and volunteers depending upon the practitioner’s status at NDCS.
2. Medical and mental health practitioners shall receive the applicable training mandated for team members or contractors and volunteers depending upon the practitioner’s status at NDCS.”

	<p>Post audit the facility provided nine National PREA Resource Center Specialized Medical and Mental Health Training Certificates dated 2.21.2023 and 2.24.2023.</p>
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Through such reviews the facility meets the standard requirements.

115.241	Screening for risk of victimization and abusiveness
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 1115" style="list-style-type: none"> <li data-bbox="280 412 959 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 564">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 600 1374 680">3. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims Policy 201.03, dated 7.31.2022 <li data-bbox="280 716 823 752">4. PREA Screening Report Highlights <li data-bbox="280 788 1417 869">5. Nebraska Department of Correctional Services, Potential for Sexual Assault/ Sexual Victimization Screening Instrument, dated 2.1.2022 <li data-bbox="280 904 868 940">6. CCCO Screening Access Spreadsheet <li data-bbox="280 976 1358 1057">7. Post Audit: Memorandum, RE: 30-Day Reassessment Notification, dated 2.24.2023 <li data-bbox="280 1093 309 1128">8. <p data-bbox="280 1227 437 1263">Interviews:</p> <ol data-bbox="280 1299 612 1473" style="list-style-type: none"> <li data-bbox="280 1299 612 1335">1. Random Residents <li data-bbox="280 1370 612 1406">2. Targeted Residents <li data-bbox="280 1442 612 1478">3. Unit Case Manager <p data-bbox="280 1514 1445 1675">Residents interviewed demonstrated most remembered being screened at intake and subsequently about a month later. Residents recalled being asked questions such as being in jail or prison, if they had been sexually victimized or sexually abused another in the past, their sexual orientation and their perception of safety.</p> <p data-bbox="280 1783 1458 2069">The interview with the Unit Case Manager demonstrated each Case Managers completed risk assessments for all intakes, typically on the day of admission and again within 30 days of the intake date. The Unit Case Manager stated risk assessments are completed in a private setting and each assesses mental health status, past history of victimization, abuse, sexual orientation and their perception of safety while in the program. The Unit Case Manager stated risk assessments are only made available to the Unit Case Managers, Administrative Program Officer,</p>

Assistant Warden and Warden.

Site Observation:

During review of 19 resident files, five of 19 intake risk screenings had not been completed, three re-assessments had not been completed and four reassessments had been completed after the 30-day requirement. The PREA Auditor requested the facility provide a memorandum stating how the facility will ensure risk assessments will be completed, and how reassessments will be completed timely.

Post audit, the facility provided a memorandum, RE: 30-Day Reassessment Notification, from the facility Acting Warden to CCC-O Staff, stating, "Effective immediately, reassessment notifications will be sent to all supervisors on the 10th and 20th of each month. This notification is a reminder for supervisors to complete the 30-day reassessment with all new transfers to CCC-O. Along with the notifications, CCC-O's PREA Compliance Manager will continue to send all supervisors the daily Transfer PREA Screenings."

(a) The Community Corrections Center Omaha PAQ states the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14-15, section P. PREA Standard Secure Facility 115.41 a-I / Community Facility 115.241 a-I Screening for Risk of Victimization and Abusiveness, states, "Each inmate will be assessed using the PREA Screening Assessment located in NICAMS, the PREA Screening Assessment will be completed during the intake process at each facility to determine the inmate's risk of being sexually abused by another inmate or sexually abusive towards other inmates. This screening will consider prior acts of sexual abuse/assault, prior convictions for violent offenses and history of prior institutional violence or sexual abuse/assault as known to NDCS. When the PREA Screening assessment indicates an inmate has experienced prior sexual victimization or has previously perpetrated sexual abuse, Mental Health staff will meet with the inmate within 14 days and complete the Mental Health PREA screening form. Additional criteria for when a PREA Screening Assessment needs to be completed and the criteria for determining risk of being sexual abused or sexually abusive towards others is detailed in policy 201.03, Identification of Potential Aggressors and Victims."

(b) The Community Corrections Center Omaha PAQ states the agency policy

requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. The number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility was 188.

Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims Policy 201.03, page 1, section I., Screening Procedures, states, "All inmates shall be assessed during an intake screening at reception facilities and upon each transfer to another facility for their risk of being sexually abused/ assaulted by other inmates or sexually abusive toward other inmates. This screening shall ordinarily take place within 72 hours of arrival at the facility and be conducted using an objective screening instrument. NDCS shall implement appropriate controls on the dissemination of this information within facilities in order to ensure sensitive information is not exploited to an inmate's detriment by staff or other inmates."

Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims Policy 201.03, page 4, section II., states, "Within a set time period not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the 72-hour intake screening. When an inmate is transferred to another facility the inmate must be screened within 72 hours of arrival and then again within a set time frame not to exceed 30 days."

The facility provided a PREA Screening Report Highlights summary. This summary demonstrates the following risk screening results.

- For both July and August, 87% of transfers received an initial PREA Screen.
- In September, 97% of transfers received an initial PREA Screen.
 - o In July, 81% of transfers received an initial PREA Screen within 3 days of transfer.
 - o In August, 65% of transfers received an initial PREA Screen within 3 days of transfer.
 - o In September, 82% of transfers received an initial PREA Screen within 3 days of transfer.
- Follow up PREA Screening (day 14-30 reassessment) is an area for

improvement.

o 37% follow up PREA Screens in compliance in July with an additional 25% late for a total of 62%.

o 17% follow up PREA Screens in compliance in August with an additional 4% early and 31% late for a total of 52% (remaining includes 39% overdue and 9% missed or moved prior to needing follow up assessment).

o 37% follow up PREA Screens in compliance in September with an additional 24% early and 15% late for a total of 76% (remaining includes 24% overdue).

§ There are 8 individuals who transferred in September who remain at CCO and are overdue for a follow up screen.

§ There are 9 additional individuals at CCO who transferred to CCO this quarter and are overdue for follow up screens. Two of these individuals also need an initial screen.

(c-e) The Community Corrections Center Omaha PAQ states the risk assessment is conducted using an objective screening instrument.

The facility provided a Nebraska Department of Correctional Services, Potential for Sexual Assault/Sexual Victimization Screening Instrument. The screening instrument includes the following Characteristics:

Criminal History Check:

- Who completed the Criminal History check: Name/Date?
- Has the individual been previously incarcerated?
- How many times
- Is the criminal history nonviolent only?
- Number of convictions that are of a violent nature to include sexual violence?
- How many convictions of sexual violence?
- Is the current conviction sexual violence?
- How many convictions for sexual violence against a child?
- How many for convictions for sexual violence against an adult
- NDCS history of perpetrated violence for sexual assault/abuse and o harassment (Misconduct reports) explain

Need to ask inmate the below questions

- Have you been previously incarcerated?
- How many times?
- Number of convictions that are of a violent nature include sexual violence?
- How many convictions for sexual violence?
- How many convictions for sexual violence against a child?
- How many convictions for sexual violence against an adult?
- Age of individual
- Height of individual
- Build of individual
- Are you willing to tell me if you've ever been a survivor/victim of sexual abuse?
- Are you a survivor of sex assault/abuse?
- Can you tell me if the sexual assault/abuse happened in: an institution/the community? (If answers yes to any of the above as the inmate if they would like to speak to a mental health staff member.) (Mental health referral completed)
- Do you have any fears for your safety while incarcerated? What are those fears?
- What is your gender identity? (male/female/transgender male/transgender female/Intersex/gender non-conforming/other/chooses not to answer)
- What is your sexual orientation? (lesbian/gay/bisexual/heterosexual/other/chooses not to answer)

(e) The Community Corrections Center Omaha PAQ states the policy requires that a resident's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness. The number of residents entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 184. Policy compliance can be found in provision (b) of this standard.

During the pre-audit phase the Auditor inquired as to the facility progress of 30-day assessments. The PREA Coordinator stated, "CCC-O has made progress with the 30-day assessments. Once I receive the daily Assessment Screening, I send these out to all the Unit Case Managers as a reminder. I also track and review these weekly. The PREA Screening - Transfer List has been uploaded to the Supplemental Documents as 115.241 - PREA Screening - Transfer List 01-25-23. The uploaded PREA Screening Report demonstrates 20 of 21 reassessments were completed on time in the month of October and 88 of 89 initial screenings were completed in the month of October.

(f) Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims Policy 201.03, page 4-5, section V. A-F, state, "The Potential for Sexual Assault/Sexual Victimization Screening Instrument should be reviewed and re-scored as necessary by designated unit staff when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Each rescreening will be posted to Data Entry and Inquiry (NICaMS). For tracking purposes, a new entry should be made in Data Entry and Inquiry (NICaMS), rather than editing a previous entry.

A. Review when there is a significant change in custody level, risk factors, historical data or override provisions.

B. Review upon receipt of an unsubstantiated PREA investigation and rescore if deemed necessary.

C. Review and rescore upon receipt of a substantiated PREA investigation.

D. Review and rescore upon receipt of an aggressive misconduct report.

E. Review and rescore if the new conviction was sexual or violent in nature or if additional significant information regarding a current offense is received.

F. Review and rescore each known transgender inmate twice a year.

If this rescore suggests any change in the inmate's aggression or victimization potential, changes to the inmate's housing, programming and work assignments shall be made as appropriate.

If an inmate's behavior indicates that he or she should no longer be classified as a Potential

Aggressor/Victim, unit staff and mental health staff should make recommendations

if an inmate's behavior indicates that he or she should no longer be classified as a Potential.

Aggressor/Victim, unit staff and mental health staff should make recommendations during the annual screenings and forward to the Institutional Classification Committee. The Warden shall be the final authority, as outlined in the override provisions.

When facility staff are made aware of any inmate-on-inmate abuse incidents, a referral must be made to mental health staff upon learning of such abuse history. Treatment will be provided as deemed necessary by mental health staff.

The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. (PREA standard Secured facilities 115.41i/ Community facility 115.241i)"

(h) The Community Corrections Center Omaha PAQ states the policy prohibits disciplining residents for refusing to answer (or for not disclosing complete information related to) the questions regarding: (a) whether or not the resident has a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the residents' own perception of vulnerability.

Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims Policy 201.03, page 3, section C., last paragraph, states, "Inmates may not be disciplined for refusing to answer or not disclosing complete information in response to the aforementioned questions.

(i) The facility provided a CCCO Screening Access Spreadsheet. This spreadsheet demonstrates only the PREA Super Users have access to the risk screening tool.

Through such reviews, the facility meets the standard requirements.

115.242	Use of screening information
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 416 1461 860" style="list-style-type: none"> <li data-bbox="280 416 956 452">1. Community Corrections Center Omaha PAQ <li data-bbox="280 488 1425 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 1461 674">3. Nebraska Dept. of Corrections Community Corrections Center – Omaha, Sexual Assault/Abuse Policy, dated 7.31.2022 <li data-bbox="280 710 1358 745">4. Post Audit: Memorandum, RE: Reassessment – 115.42, dated 2.14.2023 <li data-bbox="280 781 1337 860">5. Post Audit: Memorandum, RE: CCC-O Transfer Review – 115.42, dated 2.14.2023 <p data-bbox="280 969 437 1005">Interviews:</p> <ol data-bbox="280 1046 1206 1292" style="list-style-type: none"> <li data-bbox="280 1046 668 1081">1. Kitchen staff (informal) <li data-bbox="280 1117 1206 1153">2. Administrative Program Officer I / PREA Compliance Manager <li data-bbox="280 1189 730 1225">3. Captain / PREA Coordinator <li data-bbox="280 1261 549 1296">4. Acting Warden <p data-bbox="280 1332 1477 1444">Informal interviews with kitchen staff demonstrated they did not have an awareness of risk levels of residents working in the kitchen and were not aware residents had a risk level.</p> <p data-bbox="280 1556 1461 1758">Interviews with administrative staff demonstrated risk levels of residents were documented on a monthly tracking review form, providing information on residents with high sexual victimization potential and potential aggressors. The PREA Compliance Manager explained this information was distributed weekly to facility leadership.</p> <p data-bbox="280 1870 576 1906">On Site Observation:</p> <p data-bbox="280 1942 1477 2054">Although housing and bed assignments are placed in accordance with standard requirements, facility staff were unaware of resident risk level in education and work assignments. The facility was requested to provide a memorandum stating how the</p>

facility will inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to all applicable staff.

Post audit, the facility provided a memorandum, RE: Reassessment – 115.42, from the facility Acting Warden to CCC-O Staff, stating, “After a 30-day reassessment has been completed, if there are any changes to a screening, a reassessment roster will be generated and distributed to the facility to help identify and monitor any changes within high aggressors and high victims. This information will also be discussed in the weekly department head meetings and noted in the meeting minutes.”

Post audit, the facility provided a memorandum, RE: CCC-O Transfer Review – 115.42, from the facility Acting Warden to CCC-O Staff, stating, “Following a total population review and notification of supervisors, CCC-O will review all in incoming transfers at the weekly department head meeting. Recently transferred individuals identified as high aggressor or high victim potential will be listed in the meeting minutes to help the facility better identify and monitor the incoming population of high aggressors and high victims.”

(a) The Community Corrections Center Omaha PAQ states the agency/facility uses information from the risk screening required by §115.241 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 15, section Q. PREA Standard Secure Facility 115.42 a-g / Community Facility 115.242 a-g Use of Screening Information 1., states, “Facilities will utilize information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping those inmates who are at high risk of being sexually victimized from those who are at high risk of being sexually abusive. The institution’s physical plant, staffing levels, size, and number of programs and services, as well as activity schedules, will determine the extent to which separation is possible or contacts minimized. Computer tracking of high-risk inmates within an institution may be utilized. Facilities will make individualized determinations about how to ensure the safety of each inmate.”

(b) The Community Corrections Center Omaha PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each

resident. Policy compliance regarding individualized determinations can be found in provision (a) of this standard.

(c-g) The Community Corrections Center Omaha PAQ states the agency/facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis.

Nebraska Dept. of Corrections Community Corrections Center – Omaha, Sexual Assault/Abuse Policy, page 15, section P. 2., PREA Standard Community Facility 115.242 a-g Use of Screening Information, states, “In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, NDCS shall consider on a case-by-case basis whether a placement would ensure the inmates health and safety, and whether the placement would present management or security problems.”

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 15, section Q. PREA Standard Secure Facility 115.42 a-g / Community Facility 115.242 a-g Use of Screening Information 2-6., state,

2. “In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, NDCS shall consider on a case-by-case basis whether a placement would ensure the inmates health and safety, and whether the placement would present management or security problems.

3. Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year and shall consider any threats to safety experienced by the inmate. The PREA Compliance Manager will also complete an in-person assessment and submit a written report that will be maintained in the inmates file indicating a review was conducted.

4. A transgender or intersex inmate’s own views with respect to the inmate’s own safety shall be given serious consideration.

5. Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

6. NDCS shall not place lesbian, gay, bisexual, transgender or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.”

Through such reviews, the facility meets the standard requirements.

115.251	Resident reporting
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1433 931" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1433 564">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 600 1433 680">3. Prison Rape Elimination Act Administrative regulation 203.11 Sexual Assault/ Abuse Training PowerPoint, not date <li data-bbox="280 716 1385 797">4. Nebraska Department of Correctional Services, Sexual Assault Awareness Brochures in both English and Spanish, dated 2.2022 <li data-bbox="280 833 815 869">5. State Ombudsman Contact Photo <li data-bbox="280 904 655 940">6. Initial Report Example <p data-bbox="280 1039 437 1075">Interviews:</p> <ol data-bbox="280 1111 743 1361" style="list-style-type: none"> <li data-bbox="280 1111 608 1146">1. Random Residents <li data-bbox="280 1182 616 1218">2. Targeted Residents <li data-bbox="280 1254 743 1290">3. Case Workers and Corporals <li data-bbox="280 1326 552 1361">4. Acting Warden <p data-bbox="280 1397 1461 1523">Resident interviews demonstrated each were aware they could report to any staff, use the staff reporting or grievance boxes, through an anonymous process, call the hotline, write a letter to the ombudsman or through a third party.</p> <p data-bbox="280 1621 1461 1747">Interviews with Case Workers and Corporals demonstrated they would accept verbal, written, third party and anonymous reports and immediately report them to their supervisor.</p> <p data-bbox="280 1845 539 1881">Site Observations:</p> <p data-bbox="280 1917 1461 2087">During the tour the Auditor was able to follow directions posted near resident phones and call the agency PREA Coordinator by dialing 0.111.111.111. The phone rang into a voicemail stating the office of the Agency PREA Coordinator and instructions on leaving a message. The Auditor left a message, and the Agency</p>

PREA Coordinator was able to demonstrate she had received the message within five minutes.

(a) The Community Corrections Center Omaha PAQ states the agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other residents or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 16, section S. PREA Standard Secure Facility 115.51 a-d / Community Facility 115.251 a-d Inmate Reporting 1., states, "Inmates shall be provided with multiple ways to privately report sexual abuse/assault and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse/assault and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents.

a. Inmates may verbally report the incident to any staff member

b. Inmates may utilize the established hotline number (855-623-7360) to report an allegation anonymously. This number shall be included on all inmates Inmate Calling System (ICS) automatically. the number is a generic pin for all inmates 0-111-111-111 and speed dial 08#. These calls shall not be subject to monitoring. Upon receipt of a voice message, a system generated email is forwarded to the PREA Coordinator. See (Attachment C) for directions on dialing the PREA Hotline.

c. Inmates may report the incident in writing through an Inmate Interview Request or Grievance form."

The facility provided Nebraska Department of Correctional Services, Sexual Assault Awareness Brochures in both English and Spanish. Brochures include the following:

- The Department's Policy on Sexual Activity
- Staff-On-Inmate Sexual Behavior
- Inmate-On-Inmate or Inmate-On-Staff Sexual Behavior
- If you are sexually assaulted
- Self Protection
- Nebraska State Statute

- PREA Hotline – PIN 0-111-111-111 / speed dial 08#

The facility provided a photo of contact information posted near incarcerated individual phones stating,

- How to contact your State Ombudsman
- Address – 1445 K. Street - Lincoln, NE 68508
- Phone – 402.471.2035
- ICS Phone – 01#

(b) The Community Corrections Center Omaha PAQ states the agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Policy and practice compliance can be found in provision (a) of this standard.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 16, section S. PREA Standard Secure Facility 115.51 a-d / Community Facility 115.251 a-d Inmate Reporting 2., states, “Third Party includes fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse/assault and sexual harassment and shall also be permitted to file such requests on behalf of the inmate. Options include, but are not limited to (This provision is also listed in PREA Standard secure facility 115.52 / 115.54 and community facility 115.252 / 115.254)

- a. Hotline number (855) 623-7360
- b. Submitting an online reporting form. Procedures for third party reporting can be found on the NDCS website.
- c. PREA Hotline on the Inmate Calling System Generic Pin 0-111-111-111 speed dial 08#”

Page 17, section 3. Accepting Reports, states, “Staff will accept all reports made

verbally, in writing, anonymously, from other inmates and from third parties outside NDCS. Verbal reports will be promptly documented.”

The facility uploaded an Initial Report demonstrated notification to the Facility Security Administrator of an alleged PREA violation when it is probably that a crime has been committed. The report includes the following.

- Incident details
- Inmates involved
- Staff involved
- Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment
- Incident Reports
- Inmate Statements
- Mental Health/Medical Referral Form

(d) The Community Corrections Center Omaha PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Employees are made aware of the following through the facility PREA policy training received at orientation and annually thereafter.

Prison Rape Elimination Act Administrative regulation 203.11 Sexual Assault/Abuse Training PowerPoint, slide 26, states, “Report sexual assault, sexual abuse or sexual harassment immediately:

- Supervisor
- Facility PREA Compliance Manager
- Warden
- PREA Coordinator (479-5660)
- Department Investigators
- Privately via PREA reporting hotline (855-623-7360)

Staff will accept all reports

- Sexual assault, abuse, harassment

- Any Retaliation for reporting
- Staff neglect or violation

Through such reviews, the facility meets the standard requirements.

115.252	Exhaustion of administrative remedies
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1437 674" style="list-style-type: none"> <li data-bbox="280 412 959 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 562">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 600 1437 674">3. Nebraska Department of Correctional Services, Inmate Grievance Procedures Policy 217.02, dated 12.31.2021 <p data-bbox="280 784 437 817">Interviews:</p> <ol data-bbox="280 855 612 960" style="list-style-type: none"> <li data-bbox="280 855 612 889">1. Random Residents <li data-bbox="280 927 612 960">2. Targeted Residents <p data-bbox="280 999 1477 1200">Residents interviewed were aware of the grievance procedures and understood they could complete a grievance. Residents were aware the grievance box was in the dining hall area near the day room. Residents stated they could get a grievance form on the table in the day room area or ask a Case Worker. Residents stated they are allowed to have their own writing utensils at all times.</p> <p data-bbox="280 1310 528 1344">Site Observation:</p> <p data-bbox="280 1382 1473 1460">The facility did not have any grievances filed within the last 12 months. A grievance box and grievance forms were observed in the day room near the dining hall.</p> <p data-bbox="280 1570 1398 1686">(a) The Community Corrections Center Omaha PAQ states the agency has an administrative procedure for dealing with resident grievances regarding sexual abuse.</p> <p data-bbox="280 1796 1466 2042">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 17-18, section T. PREA Standard Secure Facility 115.52 a-g / Community Facility 115.252 a-g Exhaustion of Administrative Remedies, states, "Inmates will not be disciplined for filing a grievance related to alleged sexual abuse/assault or sexual harassment unless the facility demonstrates the grievance was deliberately filed in bad faith.</p>

NDCS does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse/assault or sexual harassment. Applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse/assault or sexual harassment will be followed per policy. An inmate is not required to use any informal grievance process (i.e., an inmate may submit a Step I Grievance without an Informal Grievance attached) or otherwise attempt to resolve an alleged incident of sexual abuse/assault or sexual harassment with staff.

An inmate who alleges sexual abuse/assault or sexual harassment may file a grievance without submitting it to a staff member who is the subject of the complaint. A grievance will not be referred to a staff member who is the subject of the complaint.

A final response to the grievance will be issued within 90 days of the initial filing. This does not include time consumed by inmates preparing an administrative appeal. An extension of up to 70 days may be requested if there is insufficient time to make an appropriate decision. Inmates will be notified in writing of the extension and be provided a date by which the decision will be made. If the inmate does not receive a response or notification of extension, he or she may consider the absence of a response to be a denial at that level.

An inmate may also file an emergency grievance if he or she feels there is a substantial risk of imminent sexual abuse/assault.

The emergency grievance will immediately be forwarded to the Shift Supervisor, who will take immediate corrective action. An initial response shall be provided within 48 hours and a final decision will be issued within five calendar days. The initial response and final decision will serve as documentation determining whether the inmate is at substantial risk of imminent sexual abuse/assault and the action taken in response to the emergency grievance.

Third Party Reporting

Third parties include fellow inmates, staff members, family members, attorneys, and outside advocates. Third parties shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse/assault or sexual harassment and shall also be permitted to file such requests on behalf of

the inmate. (This provision is also listed in PREA Standard secure facility 115.51/115.54 community facility 115.251/115.254).”

(b) The Community Corrections Center Omaha PAQ states the agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure require that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Policy compliance can be found in provision (a) of this standard.

(d) The Community Corrections Center Omaha PAQ states the agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances filed that alleged sexual abuse was zero. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was zero. Policy compliance can be found in provision (a) of this standard.

(e) The Community Corrections Center Omaha PAQ states agency policy and procedure permit third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of residents. Agency policy and procedure requires that if a resident decline to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the residents' decision to decline. The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the residents' decision to decline was zero. Policy compliance can be found in provision (a) of this standard.

(f) The Community Corrections Center Omaha PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. The number of emergency

grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days. The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days was zero. Policy compliance can be found in provision (a) of this standard.

(g) The Community Corrections Center Omaha PAQ states the agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith was zero. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.253	Resident access to outside confidential support services
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 786" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 562">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 598 1409 676">3. Nebraska Department of Correctional Services Memorandum, RE: Standard 115.53 C-4 Advocacy Attempts, dated 11.22.2022 <li data-bbox="280 712 1339 790">4. Nebraska Dept. of Correctional Services, Memorandum, RE: New PREA Advocacy Provider, dated 7.21.2021 <p data-bbox="280 898 437 934">Interviews:</p> <ol data-bbox="280 969 1206 1290" style="list-style-type: none"> <li data-bbox="280 969 596 1005">1. Random Residents <li data-bbox="280 1041 612 1077">2. Targeted Residents <li data-bbox="280 1113 743 1149">3. Case Workers and Corporals <li data-bbox="280 1184 667 1220">4. Phycologist Supervisor <li data-bbox="280 1256 1206 1292">5. Administrative Program Officer I / PREA Compliance Manager <p data-bbox="280 1326 1398 1404">Staff and residents interviewed informally and formally were aware they would contact mental health services for advocate needs.</p> <p data-bbox="280 1512 1477 1966">(a) The Community Corrections Center Omaha PAQ states the facility provides residents with access to outside victim advocates for emotional support services related to sexual abuse. The facility provides residents with access to such services by giving residents mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. The facility provides residents with access to such services by enabling reasonable communication between residents and these organizations in as confidential a manner as possible. The PAQ states, "NDCS currently does not have a MOU with a rape crisis center. However, when the inmate goes the community hospital for a SANE examination the hospital contacts a victim advocate to be present."</p> <p data-bbox="280 2002 1465 2080">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 18-19, section U. PREA Standard Secure Facility 115.53 a-c / Community</p>

Facility 115.253 a-c Inmates Access to Outside Confidential Support Services, states, "NDCS shall maintain or attempt to enter into a memorandum of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreement.

In the event that a victim advocate is needed for an incident of Sexual Assault, the facility shall make available or attempt to make available to the victim a victim advocate from a rape crisis center. If a victim advocate from a rape crisis center is not available to provide victim advocate services, the facility shall make available a qualified staff member from a community-based organization or qualified agency staff member. This person shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. The facility will document efforts to secure services from rape crisis centers on the Facility Checklist for Incidents of Sexual Assault/Abuse (Attachment E). As requested by the victim, the victim advocate, qualified agency staff member or qualified community-based organization staff member shall accompany and support the victim through the forensic examination process and investigatory interviews and shall provide emotional support, crisis intervention, information and referrals.

If requested by the victim, he or she will be allowed to contact his or her emergency contact or an immediate family member via a staff assisted telephone call. The staff assisted call shall be no longer than 15 minutes in duration. Staff will document the call, or attempted call, on an Incident Report."

(b) The Community Corrections Center Omaha PAQ states the facility informs residents, prior to giving them access to outside support services, of the extent to which such communications will be monitored.

During the pre-audit phase the Auditor inquired as to policy language for this provision. The PREA Coordinator stated, "So this is not in policy I do a memo when we get advocacy that goes out to the population, I have attached that memo. May need to include this in policy when it is up for review."

The sample memorandum states, "Effective immediately, the Women's Center for Advancement will be providing a hotline service for victims (regardless of gender or sexual orientation) of Sexual Assault, Sexual Abuse and Sexual Harassment. This Hotline will be provided 24 hours a day 7 days a week. All calls to the Women's

Center for Advancement are confidential and are not recorded. This service allows you to talk to an advocate on the phone for emotional support, information on how to report incidents of Sexual assault, sexual abuse and sexual harassment and provide coping skills.

The Women's Center for Advancement's hotline number:

generic pin 0-333-333-333

speed dial 07#.

The Women's Center for Advancement will also provide in-person advocacy visits and in-person advocacy care during a forensic examination.

You can also contact an advocate by mail, correspondence may be sent to the following address:

Women's Center for Advancement

3801 Harney Street

Omaha Nebraska 68131"

(c) The Community Corrections Center Omaha PAQ states the agency or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services related to sexual abuse.

The facility provided a Nebraska Department of Correctional Services Memorandum, RD: Standard 115.53 C-4 Advocacy Attempts from the agency PREA Coordinator to the PREA Auditor, stating, "On July 8th, 2022, NDCS signed a Memorandum of understanding with the Women's Center for Advancement. ON February 10, 2022, NDCS received a letter from the Women's Center for Advancement. Stating WCA is terminating the MOU effective March 22, 2022.

- On March 29, 2022, The NDCS Captain / PREA Coordinator reached out to bridge from violence to attempt to enter into an MOU for advocacy care.

- On July 16, 2022, The NDCS Captain / PREA Coordinator reached out to YWCA to attempt to enter into an MOU for advocacy care.

- On September 28, 2022, The NDCS Captain / PREA Coordinator reached out to The Trevor Project to attempt to enter into an MOU for advocacy care.
- On September 28, 2022, The NDCS Captain / PREA Coordinator reached out to encourage advocacy to attempt to enter into an MOU for advocacy care.
 - o Encourage was interested had a zoom meeting on October 28, 2022
 - o Sent MOU example on 11-8-2022.”

Through such reviews, the facility meets the standard requirements.

115.254	Third party reporting
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 560" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 667 437 703">Interviews:</p> <ol data-bbox="280 739 743 918" style="list-style-type: none"> <li data-bbox="280 739 608 775">1. Random Residents <li data-bbox="280 810 612 846">2. Targeted Residents <li data-bbox="280 882 743 918">3. Case Workers and Corporals <p data-bbox="280 954 1441 1079">Residents and staff interviewed demonstrated their reporting knowledge of third-party reporting stating that resident family members, friends and or legal counsel could report sexual harassment or sexual abuse allegations.</p> <p data-bbox="280 1182 528 1218">Site Observation:</p> <p data-bbox="280 1254 1436 1335">During tours of all areas of the facility, Zero Tolerance postings were present with third party reporting information.</p> <p data-bbox="280 1438 1468 1599">(a) The Community Corrections Center Omaha PAQ states the agency or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency or facility publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents.</p> <p data-bbox="280 1706 1468 2038">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 17, section 2. Third Party Reporting, states, "Third parties include fellow inmates, staff members, family members, attorneys, and outside advocates. Third parties shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse/assault or sexual harassment and shall also be permitted to file such requests on behalf of the inmate. (This provision is also listed in PREA Standard secure facility 115.51/ 115.54 community facility 115.251/115.254)."</p>

a. Hotline number (855) 623-7360

b. Submitting an online reporting form. Procedures for third party reporting can be found on the NDCS website.

c. PREA Hotline on the Inmate Calling System Generic Pin 0-111-111-111 speed dial 08#.”

On 1.6.2023, at 6:09 pm, this Auditor sent the following email to NDCS PREA Reporting Form | NDCS - Nebraska Department of Correctional Services to test the third-party reporting option to inmates, family and staff members. “My name is Karen Murray, and I am scheduled to audit the Reception and Treatment Center and am testing the third-party reporting system. Could you be so kind as to respond to this email with how you would proceed when you receive a third party PREA report.”

On 1.6.2023 at 10:17 pm, the Auditor received the following response from the Agency Captain / PREA Coordinator, stating, “In response to this email I would report the incident to the facility compliance manager to do follow up on what was reported, and then based off the victims interview I would reach out to the facility warden to determine the next steps to be completed.”

Through such reviews, the facility meets the standard requirements.

115.261	Staff and agency reporting duties
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 560" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 667 437 703">Interviews:</p> <ol data-bbox="280 739 743 918" style="list-style-type: none"> <li data-bbox="280 739 608 775">1. Random Residents <li data-bbox="280 810 612 846">2. Targeted Residents <li data-bbox="280 882 743 918">3. Case Workers and Corporals <p data-bbox="280 954 1469 1070">Interviews with each staff and residents interviewed demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment.</p> <p data-bbox="280 1178 541 1214">Site Observations:</p> <p data-bbox="280 1249 1442 1366">The facility has experienced one allegation of sexual abuse and two allegations of sexual harassment. Sources of allegations included a resident interview request form and two verbal reports from residents.</p> <p data-bbox="280 1482 1469 1850">(a/d-e) The Community Corrections Center Omaha PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p data-bbox="280 1957 1465 2074">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 19, section W. PREA Standard Secure Facility 115.61 a-f / Community Facility 115.261 a-f Staff and Agency Reporting Duties, 1-3, states, "All NDCS staff are</p>

required to report immediately and according to policy any knowledge, suspicion or information regarding:

1. An incident of sexual abuse/assault or sexual harassment that occurred in a facility, whether or not it is part of the agency.
2. Retaliation against inmates or staff who reported such an incident.
3. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Medical and mental health staff are obligated to report sexual abuse/assault and inform inmates of their duty to report and the limitations of confidentiality at the initiation of services.

If the alleged victim is under 18 years old or considered a vulnerable adult, the allegations will be reported to the Department of Health and Human Services under applicable mandatory reporting laws.”

(b) The Community Corrections Center Omaha PAQ states, apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 20, first paragraph, states, “Staff shall not reveal any information related to a sexual abuse/assault report to anyone other than to the extent necessary as specified in NDCS policy, to make treatment, investigations, and other security decisions.”

(c) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 19, last paragraph, states, “Medical and mental health staff are obligated to report sexual abuse/assault and inform inmates of their duty to report and the limitations of confidentiality at the initiation of services.”

Through such reviews, the facility meets the standard requirements.

115.262	<p data-bbox="277 107 735 152">Agency protection duties</p> <p data-bbox="277 185 1007 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="277 264 580 297">Auditor Discussion</p> <p data-bbox="277 342 544 376">Document Review:</p> <ol data-bbox="277 409 1426 562" style="list-style-type: none"> <li data-bbox="277 409 959 443">1. Community Corrections Center Omaha PAQ <li data-bbox="277 483 1426 562">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="277 667 437 701">Interviews:</p> <ol data-bbox="277 734 855 768" style="list-style-type: none"> <li data-bbox="277 734 855 768">1. Acting Warden / Facility Investigator <p data-bbox="277 813 1453 891">Interviews with the Acting Warden demonstrated the facility staff act promptly and respond properly at the discovery of an incident.</p> <p data-bbox="277 999 1465 1200">(a) The Community Corrections Center Omaha PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse was zero.</p> <p data-bbox="277 1305 1465 1552">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11. page 20, section X. PREA Standard Secure Facility 115.62 a / Community Facility 115.262 an Agency Protection Duties, states, "When NDCS learns that an inmate is subject to a substantial risk of imminent sexual abuse/assault, it shall take immediate action to protect them. To assess and implement appropriate protective measures without unreasonable delay."</p> <p data-bbox="277 1659 1241 1693">Through such reviews the facility meets the standard requirements.</p>
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115.263	Reporting to other confinement facilities
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 560" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 667 437 703">Interviews:</p> <ol data-bbox="280 739 549 775" style="list-style-type: none"> <li data-bbox="280 739 549 775">1. Acting Warden <p data-bbox="280 810 1469 972">The interview with the Acting Warden demonstrated that he was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, he had the responsibility to notify the head of the facility where the allegation occurred within 72 hours.</p> <p data-bbox="280 1079 576 1115">On Site Observation:</p> <p data-bbox="280 1151 1437 1267">Utilizing a PREA Audit - Community Confinement Facility Documentation Review - Investigations template one investigation was reviewed which was reported at another facility who notified the Community Corrections Center Omaha.</p> <p data-bbox="280 1375 1477 1626">(a) The Community Corrections Center Omaha PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was zero.</p> <p data-bbox="280 1733 1465 2065">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 20, section Y. PREA Standard Secure Facility 115.63 a-d / Community Facility 115.263 a-d Reporting to Other Confinement Facilities, states, "Within 72 hours of receipt of an allegation an inmate was sexually abused while confined at another facility, the receiving Warden/designee shall notify the Warden/designee where the incident was alleged to have occurred and the agency PREA Coordinator. Such notification shall be documented. The agency PREA Coordinator will ensure an investigation is completed according to policy."</p>

(b) The Community Corrections Center Omaha PAQ states the agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. Policy compliance can be found in provision (a) of this standard.

(d) The Community Corrections Center Omaha PAQ states the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was one. Policy compliance can be found in provision (a) of this standard.

Through such reviews the facility meets the standard requirements.

115.264	Staff first responder duties
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1425 557" style="list-style-type: none"> <li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1425 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 669 437 703">Interviews:</p> <ol data-bbox="280 741 743 775" style="list-style-type: none"> <li data-bbox="280 741 743 775">1. Case Workers and Corporals <p data-bbox="280 813 1449 1014">Interviews with each staff demonstrated they were aware of their first responder responsibilities. Staff stated reporting information is posted throughout the facility and they have access to a first responder checklist through a supervisor and or he facility shared computer drive. Staff stated they would document PREA allegations and or incidents on the Incident Checklist.</p> <p data-bbox="280 1126 528 1160">Site Observation:</p> <p data-bbox="280 1198 1461 1355">Utilizing a PREA Audit - Community Confinement Facility Documentation Review - Investigations template one investigation was reviewed which was reported by a resident to a staff member. The incident checklist was completed for this allegation of sexual harassment.</p> <p data-bbox="280 1393 1477 2056">(a) The Community Corrections Center Omaha PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the</p>

report shall be required to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

In the past 12 months, one allegation occurred where a resident was sexually abused. Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was one. In the past 12 months, there were one allegation where staff were notified within a time period that still allowed for the collection of evidence. Of these allegations the number of times the first security staff member to respond to the report was one.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 20, section Z. PREA Standard Secure Facility 115.64 / Community Facility 115.264 Staff First Responder Duties, 1.a. states, "Upon learning of an allegation an inmate was sexually assaulted, the first security staff member (team members primarily responsible for the supervision and control of inmates, including but not limited to custody, housing unit, mental health, Activities and Recreation (A & R), maintenance, teachers, etc.) to respond to the report shall be required to:

1. Separate the victim and abuser; and ensure that the victim is safe.
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
3. Security staff and non-security staff that respond to an incident will request the alleged victim and ensure the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing/showering, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating if the abuse occurred within a time period that allows for evidence collection (120 hours); and notify the Shift Supervisor."

(b) The Community Corrections Center Omaha PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.265	Coordinated response
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 414 1426 672" style="list-style-type: none"> <li data-bbox="280 414 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 488 1426 562">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 602 1378 672">3. Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment, not dated <p data-bbox="280 786 437 819">Interviews:</p> <ol data-bbox="280 860 743 963" style="list-style-type: none"> <li data-bbox="280 860 743 893">1. Case Workers and Corporals <li data-bbox="280 934 549 963">2. Acting Warden <p data-bbox="280 1003 1461 1117">Interviews with the facility staff demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to facility coordinated response.</p> <p data-bbox="280 1229 528 1263">Site Observation:</p> <p data-bbox="280 1303 1406 1377">The facility utilized a Facility Checklist to ensure the response to allegations are completed as designed by agency policy and procedure.</p> <p data-bbox="280 1489 1458 1644">(a) The Community Corrections Center Omaha PAQ states the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="280 1756 1458 1910">The facility provided a Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment. The checklist ensures the following information is completed and or directives are followed upon an allegation of sexual assault, sexual abuse and or sexual harassment.</p> <ul data-bbox="280 1951 1378 2024" style="list-style-type: none"> <li data-bbox="280 1951 1378 2024">· Date facility incident occurred/date and time reported/date and time of incident

<ul style="list-style-type: none"> · First staff on Scene with title Reporting · Alleged Victim - Name and Number · Witnesses of the Incident - Name and Number 	<p>Means of Discovery/ Alleged Perpetrator-Name/ Number</p>
<p>Steps to ensure a coordinated response for sexual Assault, Sexual Abuse and Sexual Harassment</p>	
<p>Each of the following steps must be answered with a yes, no, Initial and time.</p>	
<ul style="list-style-type: none"> · Alleged victim separated from alleged abuser · Crime scene preserved and protected if applicable 	
<p>If incident is Sexual Assault (to include rape or any allegation whereas DNA evidence, physical injury, etc. may have occurred)</p>	
<ul style="list-style-type: none"> · Request alleged victim not to take any actions that could destroy evidence · Ensure alleged abuser does not take any actions that could destroy evidence · Notify Medical for the completion of an on-site assessment of alleged victim's acute medical needs and initiation of medical protocols · Alleged victim advice of the benefits of a forensic exam and offered the opportunity to undergo an exam (if within 120 hours of incident) · If consenting, alleged victim taken to a community medical facility for initial treatment and evidence collection during examination by a SAFE or SANE · Alleged victim offered the presence of a victim advocate for the exam. · If the inmate has requested a victim advocate, once the inmate is in route to the hospital the Shift Supervisor notifies the hospital of victim advocate request · Escorting staff briefed regarding procedures and advised to document names of any victim advocate and any law enforcement/investigators · Upon return to the facility, victim is placed on 15-minute observation checks. Evaluation by mental health staff should be conducted. Alleged Victim is given the opportunity to use a phone to contact the victim advocate hotline or contact personal support person. 	
<p>Always ensure the following is completed:</p>	

· The Shift Supervisor completes a Mental Health Referral Form for both the alleged victim and alleged perpetrator, before the end of the shift. The Shift Supervisor contact Mental Health for the completion of an on-site assessment for both the alleged victim and aggressor.

· The Shift Supervisor must complete a cover letter and collect reports from reporting employee, other first responders, Mental Health and Medical. obtain inmate statements from alleged victim and alleged aggressor and completed checklist. Submit packet to the Security Administrator and PERA Compliance Manager before the end of the shift.

Through such reviews, the facility meets the standard requirements.

115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Acting Warden <p>An interview with the Acting Warden demonstrated the facility is not responsible for collective bargaining.</p> <p>(a) The Community Corrections Center Omaha PAQ states the agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 22, section BB. PREA Standard Secure Facility 115.66 a-b / Community Facility 115.266 a-b Preservation of Ability to Protect Inmates from Contact with Abusers, states, "NDCS shall not enter into any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. NDCS is not restricted from entering into or renewing agreements that govern the conduct of the disciplinary process or whether a no-contact assignment imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination the allegation of sexual abuse/assault is not substantiated."</p> <p>Through such reviews, the facility meets the standard requirements.</p>

115.267	Agency protection against retaliation
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1426 557" style="list-style-type: none"> <li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 669 437 703">Interviews:</p> <ol data-bbox="280 741 1222 846" style="list-style-type: none"> <li data-bbox="280 741 1222 775">1. Administrative Programs Officer I / PREA Compliance Manager <li data-bbox="280 813 549 846">2. Acting Warden <p data-bbox="280 884 1481 1211">The interview with the Administrative Programs Officer demonstrated she has not had the need to implement retaliation monitoring; however, she would implement monitoring at the receipt of a sexual abuse allegation. The Administrative Programs Officer stated she would monitor the victims' interactions with other residents and staff, review incident reports and case notes from other Unit Case Managers. The Administrative Programs Officer I stated she would initially document her first check in with the victim and subsequent monitoring at least every 30 days for as long as is necessary.</p> <p data-bbox="280 1319 1430 1435">The interview with the Acting Warden stated retaliation is not tolerated and the retaliation would check in with victims every two weeks to ensure retaliation was not occurring.</p> <p data-bbox="280 1547 1458 1794">(a-b) The Community Corrections Center Omaha PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. The PAQ states, "The PREA Compliance Manager at each facility monitors retaliation."</p> <p data-bbox="280 1901 1466 2018">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 22-23, section CC. PREA Standard Secure Facility 115.67 a-f / Community Facility 115.267 a-f Agency Protection against Retaliation, state,</p> <ol data-bbox="280 2056 1390 2089" style="list-style-type: none"> <li data-bbox="280 2056 1390 2089">1. "NDCS has an obligation to protect all inmates and staff who report sexual

abuse/assault or sexual harassment or cooperate with sexual abuse/assault or sexual harassment investigations from retaliation by other inmates or staff. Examples of acts of retaliation include, but are not limited to, unnecessary discipline, intimidation, unnecessary changes in work or program assignments, unjustified transfers or placements and unjustified denials of privileges or services. The facility PREA Compliance Manager is responsible for monitoring retaliation against inmates, the PREA Coordinator is responsible for monitoring retaliation against staff. Staff who believe they have been subject to retaliation should contact the PREA Coordinator in order to initiate retaliation tracking.

2. Once the PREA Compliance Manager is made aware of an open investigation, the manager shall meet with the victim and begin retaliation tracking. Facilities shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse/assault or sexual harassment or for cooperating with investigations. Monitoring of inmates will include status checks.”

(c/d) The Community Corrections Center Omaha PAQ states the facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by residents or staff. The facility will monitor conduct or treatment until the resident is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had one incidents of retaliation.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 22-23, section CC. PREA Standard Secure Facility 115.67 a-f / Community Facility 115.267 a-f Agency Protection against Retaliation, 3. a-b., states, “The conduct and treatment of inmates or staff who report sexual abuse/assault and of inmates who were reported to have suffered sexual abuse shall be monitored for at least 90 days to determine if there are changes that may suggest possible retaliation by inmates or staff. Immediate action will be taken to remedy any retaliation. The facility will continue monitoring beyond 90 days if the initial monitoring indicates a continuing need.

a. Items that should be monitored include any inmate disciplinary reports, housing or program changes or negative performance reviews or reassignments of staff.

b. The facility PREA Compliance Manager or PREA Coordinator will make periodic status checks to determine if retaliation is being perpetrated against or perceived by inmates or staff. With the approval of the Warden, the PREA Compliance Manager may designate up to three management positions (Unit Manager, Lieutenant or above) to assist with retaliation monitoring. Allegations or indications of retaliation will be reviewed and documented. Appropriate action will be taken in the event of

confirmed retaliation against inmates or staff.”

(d) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 22-23, section CC. PREA Standard Secure Facility 115.67 a-f / Community Facility 115.267 a-f Agency Protection against Retaliation, 4., states, “If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures shall be taken to protect that individual.”

Through such reviews, the facility meets the standard requirements.

115.271	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Acting Warden / Investigator <p>The interview with the facility investigator demonstrated he clearly understands and has set processes for completing investigations, to include a thorough review and in-depth documentation process.</p> <p>Site Observation:</p> <p>The facility has had three administrative investigations in past 12 months.</p> <p>(a/b) The Community Corrections Center Omaha PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 23-24, section EE. PREA Standard Secure Facility 115.71 a-I / Community Facility 115.271 a-I Criminal and Administrative Agency Investigations, 1., states, “NDCS shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse/assault and sexual harassment, including third party and anonymous reports, in a prompt, thorough and objective manner. Any outside entities responsible for conducting administrative or criminal investigations of sexual abuse/assault shall have in place a policy governing the conduct of such investigations that complies with PREA standards and shall provide training pertaining to the investigation of sexual abuse/assault in confinement settings to the agents and investigators who conduct such investigations. When outside agencies investigate sexual abuse/assault, NDCS shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation. (ACI-3D-11)</p> <ol style="list-style-type: none"> 1. “Upon receipt of an allegation for sexual assault, sexual abuse or sexual

harassment the PREA Coordinator will review the report (s) of the allegation and discuss the incident with the facility warden to determine if an investigation is warranted.

If the allegation is determined to be opened for investigation the PREA Coordinator will assign the investigation a case number in the Investigator's Case Management Data base and forward the case log and initial reports to the PREA Compliance Manager at the respective facility to be assigned to a PREA investigator.

When the PREA Coordinator reviews the allegation and discusses the incident with the facility Warden and it is determined an investigation is not warranted, the PREA Coordinator will process the information into the Investigator's Case Management Data Base and route through administration for review and comment."

(c) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 23-24, section EE. PREA Standard Secure Facility 115.71 a-I / Community Facility 115.271 a-I Criminal and Administrative Agency Investigations, 3., states, "If the allegation appears to be criminal in nature the PREA Coordinator will consult with the Investigation Coordinator for assignment to NDCS Criminal investigators and or the Nebraska State Patrol. Where sexual assault or sexual abuse is alleged by a Team Member refer to policy 215.01. If referred back to the facility to investigate, investigators who have received special training in sexual assault and abuse investigations will be utilized. the PREA Coordinator will notify the facility PREA Compliance Manager and assign the investigation a case number in the Investigator's Case Management Data Base. The case number will be given to the facility PREA Compliance Manager so he or she can keep track of the investigation. The PREA Compliance manager will meet with the victim and inform them of the open investigation and if the staff member or inmate has been reassigned to a different unit. Once completed, the investigation will be sent to the PREA Coordinator for review and appropriate action. If during the institutional investigation it is determined a crime has been committed, the investigation will stop the investigation and contact the PREA Coordinator, and the Investigation Coordinator will be immediately notified."

(b) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24-25, section EE. PREA Standard Secure Facility 115.71 a-I / Community Facility 115.271 a-I Criminal and Administrative Agency Investigations, 3. b., states, "When the quality of evidence appears to support criminal prosecution, compelled interviews will only be conducted after consulting with prosecutors as to whether the compelled interview may be an obstacle for subsequent criminal prosecution."

(e) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE. PREA Standard Secure Facility 115.71 a-l / Community Facility 115.271 a-l Criminal and Administrative Agency Investigations, 4., states, "The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. Inmates who allege sexual abuse/assault will not be submitted to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation."

(f) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE. PREA Standard Secure Facility 115.71 a-l / Community Facility 115.271 a-l Criminal and Administrative Agency Investigations, 5., states, "Administrative Investigations shall:

a. Include an effort to determine whether staff actions or failures to act contributed to the abuse.

b. Be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

c. Impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse/assault or sexual harassment are substantiated."

(g) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE. PREA Standard Secure Facility 115.71 a-l / Community Facility 115.271 a-l Criminal and Administrative Agency Investigations, 6., states, "Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence and attached copies of all documentary evidence where feasible."

(h) The Reception and Treatment Center PAQ states substantiated allegations of conduct that appear to be criminal are referred for prosecution. The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later is five.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section EE. PREA Standard Secure Facility 115.71 a-l / Community Facility 115.271 a-l Criminal and Administrative Agency Investigations, 2., states, "If the allegation appears to be criminal in nature the PREA Coordinator will consult with

the Investigation Coordinator for assignment to NDCS Criminal investigators and or the Nebraska State Patrol. Where sexual assault or sexual abuse is alleged by a Team Member refer to policy 215.01. If referred back to the facility to investigate, investigators who have received special training in sexual assault and abuse investigations will be utilized. the PREA Coordinator will notify the facility PREA Compliance Manager and assign the investigation a case number in the Investigator's Case Management Data Base. The case number will be given to the facility PREA Compliance Manager so he or she can keep track of the investigation. The PREA Compliance manager will meet with the victim and inform them of the open investigation and if the staff member or inmate has been reassigned to a different unit. Once completed, the investigation will be sent to the PREA Coordinator for review and appropriate action. If during the institutional investigation it is determined a crime has been committed, the investigation will stop the investigation and contact the PREA Coordinator, and the Investigation Coordinator will be immediately notified."

(i) The Reception and Treatment Center PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 31, section OO. PREA Standard Secure Facility 115.97 a-f / Community Confinement Facility 115.87 a-f Data Collection, 4. Maintenance of Records, states, "The case records involving allegations of sexual harassment, sexual abuse or sexual assault of inmates and the subsequent investigations and outcomes will be kept by the PREA Coordinator. Written reports regarding criminal and administrative investigations will be retained for as long as the alleged abuser is incarcerated or employed by NDCS, plus five years. The required information will be kept in the Investigator's Case Management Data Base as well as a hard copy in the PREA Coordinator's office. Each case shall be identified as one of the following PREA categories:

1. Staff on inmate sexual assault
2. Staff on inmate sexual abuse
3. Staff on inmate exhibitionism
4. Staff on inmate voyeurism
5. Staff on inmate sexual harassment
6. Inmate on inmate sexual assault
7. Inmate on inmate sexual abuse

8. Inmate on inmate sexual harassment”

(j) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section EE. PREA Standard Secure Facility 115.71 a-l / Community Facility 115.271 a-l Criminal and Administrative Agency Investigations, 7., states, “The departure of the alleged abuser or victim from the employment or control of the facility shall not provide a basis for terminating an investigation.”

(l) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section EE. PREA Standard Secure Facility 115.71 a-l / Community Facility 115.271 a-l Criminal and Administrative Agency Investigations, 8., states, “An administrative investigation assigned to a NDCS Investigator at the facility level will be submitted to the agency PREA Coordinator within 30 working days of the date of assignment. (the date the report is logged in the Investigator’s Case Management Data Base and assigned an investigative case number) based on the evidence available and the possibility of obtaining additional evidence or information. A Criminal investigation assigned to an agency Criminal Investigator will submit their report to the Investigation Coordinator upon completion. The Investigation Coordinator will consult with the PREA Coordinator upon findings.

a. NDCS investigator at the facility level that is not completed within 30 days will request an extension prior to the 30-day deadline. The facility Warden be advised of the request for an extension from a NDCS Investigator prior to approval of the extension. The PREA Coordinator must be notified of the extension once the extension is approved. When an extension is requested the granting authority will ensure that the investigation is proceeding in an appropriate direction, the information is gathered in a timely manner and all avenues are available to the investigator.”

Through such reviews, the facility meets the standard requirements.

115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Acting Warden / Investigator <p>The interview with facility investigator demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>(a) The Community Corrections Center Omaha PAQ Bureau states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 26, section FF. PREA Standard Secure Facility 115.72 a / Community Facility 115.222 an Evidentiary Standard for Administrative Investigation, states, "NDCS shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse/assault or sexual harassment are substantiated."</p> <p>Through such reviews, the facility meets the standard requirements.</p>

115.273	Reporting to residents
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 414 1426 701" style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 3. NDCS/PREA Post Investigation Inmate Notification (115.73), not dated 4. Investigation Packet <p data-bbox="280 813 437 846">Interviews:</p> <ol data-bbox="280 887 1222 920" style="list-style-type: none"> 1. Administrative Programs Officer I / PREA Compliance Manager <p data-bbox="280 958 1458 1115">Interviews with the Administrative Programs Officer demonstrated she would personally verbally inform the resident of the outcome of an investigation. The Administrative Programs Officer would also document the verbal notification within the facility investigation documentation.</p> <p data-bbox="280 1227 1469 1592">(a) The Community Corrections Center Omaha PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged resident sexual abuse that were completed by the agency/facility in the past 12 months was one. Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of residents who were notified, verbally or in writing, of the results of the investigation was one.</p> <p data-bbox="280 1704 1465 2069">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 26, section GG. PREA Standard Secure Facility 115.73 a-f / Community Facility 115.273 a-f Reporting to Inmates, 1. Reporting to Inmates, states, "Following an investigation into an inmate's allegation that he or she suffered sexual abuse/ assault or harassment, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. If NDCS did not conduct the investigation, it shall request the relevant information from the Nebraska State Patrol in order to inform the inmate. All notifications or attempts shall be made by the facility PREA Compliance Manager or designee and</p>

documented. The obligation to report is terminated if the inmate is released from NDCS custody.”

The facility provided an investigation packet. The investigation packet demonstrates the following is documented during an investigation.

- PREA Investigation Cover Sheet
- PREA Investigation
- Investigative Case Log Report
- Spreadsheet of persons involved information to include: name, inmate number, DOB, race, facility and TRD.
- Letter to Facility Security Administrator with Incident Report Details, inmates involved, staff involved and actions taken
- Incident report
- Inmate statements
- Mental Health/Medical Referral Form for both the alleged victim and abuser
- Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment

(b) The Community Corrections Center Omaha PAQ states an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation. The number of investigations of alleged resident sexual abuse in the facility that were completed by an outside agency in the past 12 months was zero. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states following a resident’s allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever: (a) the staff member is no longer posted within the resident’s unit; (b) the staff member is no longer employed at the facility; (c) the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (d) the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

o Staff Suspect no longer employed Suspect (staff or Inmate) indicted

o Suspect (staff or Inmate) convicted

· Inmate Signature/Inmate #/Date/Time

· PREA Compliance Manager signature/Date/Time

· Facility Warden signature/Date/Time

· PREA Coordinator signature/Date/Time

(d) The Community Corrections Center Omaha PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: (a) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (b) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27, section GG. PREA Standard Secure Facility 115.73 a-f / Community Facility 115.273 a-f Reporting to Inmates, 3. Inmate Allegation against another Inmate, states, "Upon completion of the investigation (including the final review) of an inmate's allegation that another inmate has committed sexual abuse/assault against the inmate, he or she will be informed whenever:

a. It is learned the alleged abuser has been indicted on a charge related to sexual abuse/assault within the facility.

b. It is learned the alleged abuser has been convicted on a charge related to sexual abuse within the facility."

(e) The Community Corrections Center Omaha PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In the past 12 months, the number of notifications to residents that were provided pursuant to this standard was zero. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.276	Disciplinary sanctions for staff
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 560" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 667 437 703">Interviews:</p> <ol data-bbox="280 739 568 775" style="list-style-type: none"> <li data-bbox="280 739 568 775">1. Acting Warden <p data-bbox="280 810 1468 891">The interview with the Acting Warden demonstrated there were zero staff who were disciplined for violation of an agency sexual abuse or sexual harassment policy.</p> <p data-bbox="280 999 526 1034">Site Observation:</p> <p data-bbox="280 1070 1458 1151">During the last audit cycle, the facility did not have any staff subject to disciplinary action due to violating sexual abuse or sexual harassment policies.</p> <p data-bbox="280 1258 1430 1375">(a) The Community Corrections Center Omaha PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="280 1482 1477 2065">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27, section HH. PREA Standard Secured Facility 115.76 a-d / Community Facility 115.276 a-d Disciplinary Sanctions for Staff, states, "Team members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse/assault or sexual harassment policies. Disciplinary sanctions for violations of agency policies relating to sexual abuse/assault or sexual harassment (other than actually engaging in sexual abuse/assault) shall be commensurate with the nature and circumstances of the acts committed, the team member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse/assault. All terminations for violations of agency sexual abuse/assault or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not</p>

criminal, and to any relevant licensing bodies.”

(b) The Community Corrections Center Omaha PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies.

The facility provided a Department of Correctional Services News Release, NDCS Staff Member Arrested. This release documents the details of a staff termination and arrest for sexual abuse with an inmate.

(c) The Community Corrections Center Omaha PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment. Policy compliance can be found in provision (a) of this standard.

(d) The Community Corrections Center Omaha PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.277	Corrective action for contractors and volunteers
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1426 557" style="list-style-type: none"> <li data-bbox="280 412 959 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 669 437 703">Interviews:</p> <ol data-bbox="280 741 552 775" style="list-style-type: none"> <li data-bbox="280 741 552 775">1. Acting Warden <p data-bbox="280 813 1449 927">The interview with the Acting Warden demonstrated there were zero volunteers or contractors who were disciplined for violation of an agency sexual abuse or sexual harassment policy.</p> <p data-bbox="280 1039 528 1072">Site Observation:</p> <p data-bbox="280 1111 1436 1225">During the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies.</p> <p data-bbox="280 1337 1469 1706">(a) The Community Corrections Center Omaha PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, contractors or volunteers have not been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of residents was zero.</p> <p data-bbox="280 1818 1469 2063">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27, section II. PREA Standard Secure Facilities 115.77 a-b / Community Facilities 115.277 a-b Corrective Action for Contractors and Volunteers, states, "Any contractor or volunteer who engages in sexual abuse/assault shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The</p>

facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse/assault or sexual harassment policies by a contractor or volunteer.”

(b) The Community Corrections Center Omaha PAQ the facility takes appropriate remedial measures and considers whether to prohibit further contact with Residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.278	Disciplinary sanctions for residents
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1426 557" style="list-style-type: none"> <li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p data-bbox="280 669 437 703">Interviews:</p> <ol data-bbox="280 741 549 775" style="list-style-type: none"> <li data-bbox="280 741 549 775">1. Acting Warden <p data-bbox="280 813 1386 887">An interview with the Acting Warden demonstrated residents would be held to disciplinary action as stated in the resident handbooks.</p> <p data-bbox="280 999 1473 1364">(a) The Community Corrections Center Omaha PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months, the number of administrative findings of resident-on-resident sexual abuse that have occurred at the facility was zero. In the past 12 months, the number of criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the facility was one.</p> <p data-bbox="280 1476 1473 1760">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27-28, section JJ. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 1., states, "Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding the inmate engaged in inmate-on-inmate sexual abuse/assault or sexual harassment or following a criminal finding of guilt for inmate-on-inmate sexual abuse/assault.</p> <p data-bbox="280 1872 1461 2069">If a Misconduct Report (MR) has not previously been written, an MR shall be written on the abuser by the facility PREA Compliance Manager/designee after he or she receives the result of the investigation from the PREA Coordinator confirming the allegation has been substantiated. The point of discovery for the violation will be when the results of the investigation are received by the facility PREA Compliance</p>

Manager/designee.”

(b) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 2., states, “Sanctions shall be administered following the guidelines set forth in the Code of Offenses Chapter 6 and shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories.”

(c) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 3., states, “The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.”

(d) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 4., states, “If the facility offers therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. If such a determination is made the inmate will be re-classified accordingly.”

(b) The Community Corrections Center Omaha PAQ states the agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

(c) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 5., states, “Inmates shall not be disciplined for having sexual contact with staff unless it is determined the staff member did not consent to such contact.”

(f) The Community Corrections Center Omaha PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section Jj. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 6., states, "For the purpose of disciplinary action, a report of sexual abuse/assault or sexual harassment made in good faith based upon a reasonable belief the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation."

(g) The Community Corrections Center Omaha PAQ states the agency prohibits all sexual activity between residents. If the agency prohibits all sexual activity between residents and disciplines residents for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section Jj. PREA Standard Secure Facility 115.78 a-g / Community Facility 115.278 a-g Disciplinary Sanctions for Inmates, Disciplinary Process, 7., states, "While NDCS does prohibit all sexual activity between inmates, such activity, when it occurs, will not constitute sexual abuse if it is determined the activity is consensual and has not been coerced."

Through such reviews, the facility meets the standard requirements.

115.282	Access to emergency medical and mental health services
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 414 1426 629" style="list-style-type: none"> <li data-bbox="280 414 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 488 1426 562">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 602 1054 636">3. ED Patient Summary, Methodist Women’s Hospital <p data-bbox="280 741 437 775">Interviews:</p> <ol data-bbox="280 815 772 987" style="list-style-type: none"> <li data-bbox="280 815 772 848">1. Contracted Registered Nurse <li data-bbox="280 889 772 922">2. Associate Director of Nursing <li data-bbox="280 963 683 996">3. Phycologist Supervisor <p data-bbox="280 1028 1449 1102">Interviews with the medical and mental health staff demonstrated residents would be taken to the</p> <p data-bbox="280 1142 1142 1176">University of Nebraska University for all emergency services.</p> <p data-bbox="280 1285 528 1319">Site Observation:</p> <p data-bbox="280 1359 1417 1433">In the past 12 months the facility has not experienced a sexual abuse allegation that resulted in emergency medical and mental health services.</p> <p data-bbox="280 1543 1434 1742">(a/b) The Community Corrections Center Omaha PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.</p> <p data-bbox="280 1852 1474 2051">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section KK. PREA Standard Secure Facility 115.81 / Community Facility 115.281 Medical and Mental Health Screening History of Sexual Abuse, states, “ If the Screening pursuant to PREA Standard 115.41 indicates that a prison/jail inmates has experienced prior sexual victimization, or has perpetrated sexual abuse/assault</p>

whether it occurred in an institutional setting or in the community, staff shall ensure that the inmates offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Any information related to sexual victimization or abusiveness is strictly limited to medical and mental health practitioners and staff as necessary for treatment plans, security, housing, work education and program assignments. (ACI-3D-13)

Medical and Mental Health staff shall obtain informed consent from inmates before reporting prior information about sexual victimization that did not occur in an institutional setting, unless the inmate is under 18 years of age.”

Nebraska Department of Correctional Services, Health Record Example. The example documents the following.

- ID Number
- Inmate Name
- Facility
- Housing Unit
- Bed
- Received Date
- Special Needs or Needs Levels
- Assigned Clinician and Needs Levels
- Mental Health Contacts Information

(c) The Community Corrections Center Omaha PAQ states, resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Policy compliance can be found in provision (a) of this standard.

The facility provided an emergency department patient summary from Methodist Women’s Hospital. The summary includes testing performed for sexually infections prophylaxis.

(d) The Community Corrections Center Omaha PAQ states, treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.283	<p data-bbox="277 107 1469 192">Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p data-bbox="277 232 1007 264">Auditor Overall Determination: Meets Standard</p> <p data-bbox="277 309 580 340">Auditor Discussion</p> <p data-bbox="277 385 544 416">Document Review:</p> <ol data-bbox="277 456 1445 719" style="list-style-type: none"> <li data-bbox="277 456 959 488">1. Community Corrections Center Omaha PAQ <li data-bbox="277 528 1425 604">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="277 645 1445 719">3. Nebraska Dept. of Correctional Services, Identification of Potential Aggressors and Victims, Policy 201.03, dated 7.31.2022 <p data-bbox="277 828 437 860">Interviews:</p> <ol data-bbox="277 900 772 1077" style="list-style-type: none"> <li data-bbox="277 900 772 931">1. Contracted Registered Nurse <li data-bbox="277 972 772 1003">2. Associate Director of Nursing <li data-bbox="277 1043 684 1075">3. Phycologist Supervisor <p data-bbox="277 1117 1418 1232">Interviews with medical and mental health staff demonstrated each department would follow any and all orders received for ongoing care for residents returning from a sexual abuse forensic exam.</p> <p data-bbox="277 1344 1482 1500">(a-c/g) The Community Corrections Center Omaha PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p data-bbox="277 1612 1477 2067">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 31-32, section MM. PREA Standard Secure Facility 115.83 a-h / Community Facility 115.283 a-h Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers, states, "All inmates shall be offered medical and mental health evaluations and as appropriate, treatment if they have been the victim of sexual assault/abuse. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to, or placement in other facilities or their release from custody. Services shall be consistent with community level of care. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any</p>
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investigation arising out of the incident.

All inmates alleging, they are victims of sexual assault shall be offered tests for sexually transmitted infections as medically appropriate. Medical staff will provide appropriate counseling and information relative to sexually transmitted infections. Preventive treatment and follow-up for sexually transmitted infections will be offered to all victims as appropriate. Inmate victims of sexually abusive vaginal penetration shall be offered pregnancy tests. If pregnancy results from the incident, the victim shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.”

(d) This provision is not applicable as the facility does not care for female residents.

(e) This provision is not applicable as the facility does not care for female residents.

(f) The Community Corrections Center Omaha PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Policy compliance can be found in provision (a) of this standard.

(h) The Community Corrections Center Omaha PAQ states the facility does attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.

Nebraska Dept. of Correctional Services, Identification of Potential Aggressors and Victims, Policy 201.03, page 5, second paragraph states, “When facility staff are made aware of any inmate-on-inmate abuse incidents, a referral must be made to mental health staff upon learning of such abuse history. Treatment will be provided as deemed necessary by mental health staff.”

Through such reviews, the facility meets the standard requirements.

115.286	Sexual abuse incident reviews
	<p data-bbox="280 188 1007 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 297">Auditor Discussion</p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1426 701" style="list-style-type: none"> <li data-bbox="280 412 959 445">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 557">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 906 629">3. Sexual Abuse Incident Review Template <li data-bbox="280 667 834 701">4. Completed Sexual Incident Review <p data-bbox="280 813 437 846">Interviews:</p> <ol data-bbox="280 884 552 918" style="list-style-type: none"> <li data-bbox="280 884 552 918">1. Acting Warden <p data-bbox="280 956 1461 1155">The team on-site clearly articulated their review of all incidents reported and investigations of sexual harassment and sexual abuse. The team considers demographics of residents, facility area where abuse was alleged to have occurred, staffing patterns and technology when reviewing incidents of sexual harassment or sexual abuse.</p> <p data-bbox="280 1267 1481 1467">(a) The Community Corrections Center Omaha PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been one criminal and or administrative investigations of alleged sexual abuse completed at the facility,</p> <p data-bbox="280 1579 1469 1868">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29, section NN. PREA Standard Secure Facility 115.86 a-b / Community Facility 115.286 a-b Sexual Abuse Incident Reviews 1., states, "The facility shall conduct a Sexual Abuse Incident Review at the conclusion of every sexual abuse/assault investigation for all substantiated and unsubstantiated allegations. It is not necessary to complete Incident Reviews for occurrences or allegations of sexual harassment."</p> <p data-bbox="280 1980 1469 2089">The facility provided a Sexual Abuse Incident Review. The review is completed by the Facility PREA Compliance Manager and demonstrates the following is completed for sexual abuse incident reviews.</p>

- Executive Summary
- Summary of the Incident
- Incident Events and Synopsis
- Analysis of Incident
- Recommendations for Improvement
- Conclusions

The facility provided a completed Sexual Abuse Incident Review. The review demonstrates the investigation was completed timely, accurately, thoroughly and objectively. This particular investigation was referred and completed by the state patrol, and reviewed by the facility once an outcome was provided by the state patrol.

(b) The Community Corrections Center Omaha PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents were zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29-30, section NN. PREA Standard Secure Facility 115.86 a-b / Community Facility 115.286 a-b Sexual Abuse Incident Reviews 2., states, “The facility PREA Management Team is responsible for conducting the incident review and shall ordinarily meet within 30 days of the final review and closing of the investigation. The facility PREA Compliance Manager will oversee the PREA Management Team, which will include, at a minimum, one person from each of the following:

- a. Upper-level management officials (i.e., Deputy, Associate or Assistant Warden; Major; Captain; Unit Administrator)
- b. Line supervisors (i.e., Lieutenant, Sergeant, Unit Manager, Unit Case Manager)
- c. Investigative staff (i.e., Intelligence supervisor or other Intelligence staff)
- d. Medical or mental health staff Specific operational procedures regarding the PREA Management Teams are detailed in facility Procedures.”

(c) The Community Corrections Center Omaha PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. Compliance can be found in provision (b) of this standard.

(c) The Community Corrections Center Omaha PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and Acting Warden.

(d) The Community Corrections Center Omaha PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29-30, section NN. PREA Standard Secure Facility 115.86 a-b / Community Facility 115.286 a-b Sexual Abuse Incident Reviews 3., The review team shall, states,

a. "Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse/assault.

b. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender or intersex identification; status or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility, including retaliation for prior incidents or allegations of sexual assault/abuse.

c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.

d. Assess the adequacy of staffing levels in that area during different shifts.

e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

f. Prepare a report of its findings, including but not necessarily limited to determinations made and any recommendations for improvement. The facility PREA Compliance Manager will submit the report to the Warden/designee for his/her review, and then sent to the PREA Coordinator."

(e) The Reception and Treatment Center PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.

Compliance can be found in provision (d) of this standard.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29-30, section NN. PREA Standard Secure Facility 115.86 a-b / Community Facility 115.286 a-b Sexual Abuse Incident Reviews 4., states, "The facility shall implement the recommendations for improvement or shall document its reasons for not doing so."

Through such reviews, the facility meets the standard requirements.

115.287	Data collection
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1449 631" style="list-style-type: none"> <li data-bbox="280 412 956 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1425 560">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <li data-bbox="280 595 1449 631">3. Nebraska Department of Correctional Services Annual PREA Assessment 2021 <p data-bbox="280 739 437 775">Interviews:</p> <ol data-bbox="280 810 715 846" style="list-style-type: none"> <li data-bbox="280 810 715 846">1. Deputy Director of Prisons <p data-bbox="280 882 1469 1088">The interview with the Deputy Director of Prisons demonstrated the agency reviews all incident reports of sexual harassment and sexual abuse, staff and inmates involved in allegations, compile year end reports, outcries and investigations referred for criminal prosecution and look for common trends. The agency focuses on areas to address in the past year and identifies areas needing corrective action.</p> <p data-bbox="280 1196 1420 1312">(a/c) The Community Corrections Center Omaha PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p data-bbox="280 1420 1481 1626">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 30-31, section OO. PREA Standard Secure Facility 115.87 a-f / Community Facility 115.287 a-f Data Collection, 1., states, "NDCS shall collect accurate, uniform data for every allegation of sexual abuse/assault at all facilities using a standardized instrument and set of definitions. This data shall be aggregated at least annually.</p> <ol data-bbox="280 1662 1477 2047" style="list-style-type: none"> <li data-bbox="280 1662 1477 1778">1. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the DOJ, which is completed by the PREA Coordinator. <li data-bbox="280 1814 1453 1930">2. NDCS shall maintain, review and collect data as needed from all available incident-based documents, including reports, investigation files and Sexual Abuse/ Assault Incident Reviews. <li data-bbox="280 1966 1477 2047">3. Upon request, NDCS shall provide all such data from the previous calendar year to the DOJ."

(b) The Community Corrections Center Omaha PAQ states the agency aggregates the incident-based sexual abuse at least annually. Policy compliance can be found in provision (a) of this standard.

The facility provided the Nebraska Department of Correctional Services Annual PREA Assessment for 2021. The assessment demonstrates the following is documented.

- Introduction of PREA
- Assessment of NDCS; s Progress
- Goals for 2022
- Facility Audit Schedule
- PREA Investigations
- Institutions who issued misconduct reports for sexual assault rule violations
- Victim Advocacy
- Nebraska Statewide Coordinated Response Team

This assessment is signed by the Captain/PREA Coordinator, PREA Compliance Manager, Security Administrator, Deputy Director of Prisons, Deputy Director of Programs, Chief of Operations, and Director.

(d) The Community Corrections Center Omaha PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy compliance can be found in provision (a) of this standard.

(e) The Community Corrections Center Omaha PAQ states N/A as the agency does not contract with private facilities. The contracting sources identified in 115.42 are county contracts and contract language for those facilities is inclusive of PREA Audit requirements.

(f) The Community Corrections Center Omaha PAQ states the agency provided DOJ with data from the previous calendar year upon request.

	Through such reviews, the facility meets the standard requirements.
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115.288	Data review for corrective action
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 580 300">Auditor Discussion</p> <p data-bbox="280 340 544 376">Document Review:</p> <ol data-bbox="280 412 1426 636" style="list-style-type: none"> <li data-bbox="280 412 959 448">1. Community Corrections Center Omaha PAQ <li data-bbox="280 483 1426 564">2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.202 <li data-bbox="280 600 1347 636">3. Agency website agency report: agency_year_report.pdf (nebraska.gov) <p data-bbox="280 743 1474 985">(a) The Community Corrections Center Omaha PAQ states the agency reviews data collected and aggregated pursuant to §115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.</p> <p data-bbox="280 1093 1465 1294">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 32, section PP. PREA Standard Secure Facility 115.88 / Community Facility 115.288 Data Review for Corrective Action 1., states, “NDCS shall review data in order to assess and improve the effectiveness of NDCS’s sexual abuse/assault prevention, detection and response policies, practices and training by:</p> <ol data-bbox="280 1335 1442 1980" style="list-style-type: none"> <li data-bbox="280 1335 679 1370">a. Identifying problem areas <li data-bbox="280 1406 954 1442">b. Taking corrective action on an ongoing basis. <li data-bbox="280 1478 1442 1559">c. Preparing an annual report of its findings and corrective actions for each facility and NDCS as a whole. <ol data-bbox="280 1594 1458 1980" style="list-style-type: none"> <li data-bbox="280 1594 1442 1711">1. These reports shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of NDCS’s progress in addressing sexual abuse/assault. <li data-bbox="280 1747 1410 1827">2. The reports shall be approved by the Director/designee and made readily available to the public through its website. <li data-bbox="280 1863 1458 1980">3. NDCS may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.”

(b) The Community Corrections Center Omaha PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

(c) The Community Corrections Center Omaha PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head. The Annual Report is available at [agency_year_report.pdf](#) ([nebraska.gov](#))

1. The Community Corrections Center Omaha PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets the standard requirements.

115.289	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Community Corrections Center Omaha PAQ 2. Nebraska Dept. of Correctional Services Sexual Assault/Abuse Policy 203.11, dated 7.31.2022 <p>(a/d) The Community Corrections Center Omaha PAQ states the agency ensures that incident-based and aggregate data are securely retained.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 32-33, section, QQ. PREA Standard Secure Facility 115.89 a-d / Community Facility 115.289 a-d Data storage, publications, and destruction states, "The data collected shall be securely retained. All aggregated sexual abuse/assault data shall be made readily available to the public at least annually through the agency's website; all personal identifiers will be removed prior to making the information available to the public. The PREA Coordinator shall be responsible for collection and retention of said data. NDCS shall maintain sexual abuse/assault data collected for at least 10 years after the date of the initial collection unless Federal, State or local law requires otherwise."</p> <p>(b) The Community Corrections Center Omaha PAQ states the agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Community Corrections Center Omaha PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) This standard is not applicable as the facility is a standalone facility and not part of an agency of facilities.</p> <p>(b) This is the third audit cycle for Community Corrections Center Omaha and the first year of the fourth audit cycle.</p> <p>(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> <p>(n) Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Through such reviews, the facility meets the standard requirements.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(b) The agency has their 2019 audit report posted on their facility website. Through such reviews, the facility meets the standard requirements.

Appendix: Provision Findings		
115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes
115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	yes
115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	yes

115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	no
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	no
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	yes

115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	no

115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents 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 cell checks?	yes
	Does the facility have procedures that enable residents 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 cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	no
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with residents with disabilities including residents who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes

115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes

115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	yes
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes

115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes
115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	yes

115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes

115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes

115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes

115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes

115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes

115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes

115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.242 (f)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.251 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes

115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	no
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	no
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	no
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	no
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes

115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.277 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes

115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits?	yes
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes

115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes

115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes