

# PREA Facility Audit Report: Final

**Name of Facility:** Rio Grande Processing Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 05/18/2026

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"/>
<b>Auditor Full Name as Signed:</b> Jennifer Sheahan	<b>Date of Signature:</b> 05/18/2026

AUDITOR INFORMATION	
<b>Auditor name:</b>	Sheahan, Jennifer
<b>Email:</b>	jsheahanprea@gmail.com
<b>Start Date of On-Site Audit:</b>	06/09/2025
<b>End Date of On-Site Audit:</b>	06/11/2025

FACILITY INFORMATION	
<b>Facility name:</b>	Rio Grande Processing Center
<b>Facility physical address:</b>	1001 San Rio Boulevard, Laredo, Texas - 78046
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	United States Marshals Service
<b>Email Address:</b>	eliu.harper@usdoj.gov
<b>Telephone Number:</b>	956-794-1060

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Juan Baltazar
<b>Email Address:</b>	juan.baltazar@geogroup.com
<b>Telephone Number:</b>	956-718-4700

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Oscar Magana
<b>Email Address:</b>	omagana@geogroup.com
<b>Telephone Number:</b>	956-718-4700

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Monica Solis
<b>Email Address:</b>	msolis@geogroup.com
<b>Telephone Number:</b>	956-718-4700

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1917
<b>Current population of facility:</b>	1703
<b>Average daily population for the past 12 months:</b>	1567
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Both women/girls and men/boys

<b>Age range of population:</b>	18-77
<b>Facility security levels/inmate custody levels:</b>	Medium Risk Facility
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	388
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	11
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	7

#### AGENCY INFORMATION

<b>Name of agency:</b>	The GEO Group, Inc.
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	4955 Technology Way, Boca Raton, Florida - 33431
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

#### Agency Chief Executive Officer Information:

<b>Name:</b>	George Zoley
<b>Email Address:</b>	gz121481@geogroup.com
<b>Telephone Number:</b>	5618930101

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	John Hardwick	<b>Email Address:</b>	johardwick@geogroup.com
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# Facility AUDIT FINDINGS

## 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:

14

- 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.13 - Supervision and monitoring
- 115.17 - Hiring and promotion decisions
- 115.31 - Employee training
- 115.32 - Volunteer and contractor training
- 115.34 - Specialized training: Investigations
- 115.35 - Specialized training: Medical and mental health care
- 115.41 - Screening for risk of victimization and abusiveness
- 115.67 - Agency protection against retaliation
- 115.73 - Reporting to inmates
- 115.81 - Medical and mental health screenings; history of sexual abuse
- 115.87 - Data collection
- 115.88 - Data review for corrective

	action <ul style="list-style-type: none"><li>• 115.89 - Data storage, publication, and destruction</li></ul>
<b>Number of standards met:</b>	
31	
<b>Number of standards not met:</b>	
0	

## POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-06-09
2. End date of the onsite portion of the audit:	2025-06-11

#### 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
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Pillar Medical and Mental Health Services Webb County District Attorney's Office

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1917
15. Average daily population for the past 12 months:	1567
16. Number of inmate/resident/detainee housing units:	9
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

**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**

<b>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	1119
<b>25. 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:</b>	0
<b>26. 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:</b>	0
<b>27. 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:</b>	0
<b>28. 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:</b>	0
<b>29. 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:</b>	853
<b>30. 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:</b>	3

<p><b>31. 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:</b></p>	<p>0</p>
<p><b>32. 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:</b></p>	<p>18</p>
<p><b>33. 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:</b></p>	<p>30</p>
<p><b>34. 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:</b></p>	<p>0</p>
<p><b>35. 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):</b></p>	<p>Rio Grande Processing Center is a medium security prison under contract with the US Marshall's Service. There were three self-identified LGBTI detainees and three detainees with physical disabilities. Most of the detainees spoke Spanish and did not speak or understand English well. Some detainees were bilingual and spoke, read and understood both English and Spanish. The detainee population is mostly Hispanic but includes African American and Caucasian detainees. All detainees were respectful in their communication with the auditor and Rio Grande Processing Center staff. All detainees interviewed reported they felt safe in the facility. All detainees interviewed indicated there was at least one facility staff person who they felt comfortable reporting sexual abuse or sexual harassment allegations. The interviewed detainees stated staff takes all sexual abuse and sexual harassment reports seriously.</p>

<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>36. 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:</b>	404
<b>37. 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:</b>	7
<b>38. 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:</b>	11
<b>39. 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:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	34

<p><b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Age</p> <p><input type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p><b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>Detainees were randomly selected for interviews during the on-site. Detainees from all housing units were interviewed. Detainees selected were from racial and ethnic backgrounds that reflect the general makeup of the detainee population. The current detainee roster was used to select detainees for interviews.</p>
<p><b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>44. 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):</b></p>	<p>Detainee interviews were conducted with the assistance of an interpreter when needed. Interviews were conducted in private spaces where facility staff could monitor the interaction for safety reasons. All detainees were respectful in their communication with the auditor and facility staff.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>22</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><b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>No detainees with physical disabilities were observed during the on-site review. Medical staff confirmed there were no detainees with physical disabilities.</p>
<p><b>48. 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:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>No detainees with cognitive or functional disabilities were observed during the on-site review. Medical and mental health staff confirmed there were no detainees with physical disabilities.</p>
<p><b>49. 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:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>No detainees who are blind/low vision were observed during the on-site review. Medical staff confirmed there were no detainees who are blind/low vision.</p>
<p><b>50. 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:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>No detainees who were deaf/hard-of-hearing were observed during the on-site review. Medical staff confirmed there were no detainees who were deaf/hard-of-hearing.</p>
<p><b>51. 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:</b></p>	<p>15</p>
<p><b>52. 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:</b></p>	<p>3</p>
<p><b>53. 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:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>No detainees who self-identified as transgender were observed during the on-site review. Medical and mental health staff confirmed there were no detainees detainees who self-identified as transgender.</p>
<p><b>54. 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:</b></p>	<p>1</p>
<p><b>55. 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:</b></p>	<p>3</p>
<p><b>56. 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:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>No detainees housed in involuntary protective custody or segregated housing due to their risk of sexual victimization or reporting an incident of sexual abuse. Interviews with staff who supervise the restricted housing unit, the PCM and the facility administrator confirmed they do not use involuntary protective custody or segregated housing for detainees at-risk for victimization.</p>
<p><b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>58. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>18</p>
<p><b>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" 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><b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>Staff were randomly selected from the current staff roster provided. Length of time employed at the facility, shift assignment, and rank/position were considered when selecting staff for interviews.</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.

<b>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	17
<b>63. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>65. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>66. Were you able to interview the PREA Compliance Manager?</b>	<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)

**67. 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
- Intake staff

	<input type="checkbox"/> Other
<b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other

<p><b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b></p>	<p>All staff who were interviewed were respectful. They were knowledgeable of the facility PREA policies and procedures. All staff expressed that detainee safety is important to them and they take all reports of sexual abuse or sexual harassment seriously.</p>
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**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.

<p><b>71. Did you have access to all areas of the facility?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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**Was the site review an active, inquiring process that included the following:**

<p><b>72. 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)?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p><b>73. 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)?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p><b>74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p><b>75. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p><b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>Reporting and outside confidential support services hotlines were tested. All areas of the facility were accessible during the on-site review. Thirteen detainees were informally interviewed during the on-site review. Staff facilitating the tour and stationed throughout the facility were informally interviewed during the on-site review.</p>
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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.

<p><b>77. 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?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p><b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>PREA-related documents were provided pre-audit. Other documents, including detainee and staff files, investigations, training records, medical and mental health information, were requested and provided. PREA information for detainees, such as detainee handbooks, PREA pamphlets, PREA education video and PREA signs were observed throughout the facility.</p>
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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.

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

	<b># of sexual abuse allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual abuse</b>	2	1	1	1
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	2	1	1	1

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

	<b># of sexual harassment allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	2	0	2	0
<b>Total</b>	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	1	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	0	1	0

### 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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	1	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	1	0
<b>Total</b>	0	1	1	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

<b>85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b>	6
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<p><b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></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 sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>4</p>
<p><b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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 abuse investigation files)</p>
<p><b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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 abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>2</p>
<p><b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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 staff-on-inmate sexual abuse investigation files)</p>

<p><b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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 staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>6</p>
<p><b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></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 sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>3</p>
<p><b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></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><b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></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>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	3
<b>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	<p>Since there was one sexual abuse investigation in 2025 (outcome-unfounded), the facility provided closed investigation files from the audit cycle. All investigation files were stored in a locked filing cabinet, in a locked office. They were in good condition and contained all the required documents.</p>
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>102. 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.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

## Non-certified Support Staff

**103. 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.**

Yes

No

## AUDITING ARRANGEMENTS AND COMPENSATION

**108. Who paid you to conduct this audit?**

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>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.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center’s pre-audit evidentiary documents was conducted. Information from telephonic and on-site interviews was also relied upon to determine compliance with Standard 115.11.</p> <p>Rio Grande Processing Center submitted the facility policy “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Interviews with the agency PREA Coordinator and the facility PREA Compliance Manager (PCM) were conducted. The PREA Coordinator reports to the Vice President of Contract Administration and Compliance. He reported he has sufficient time and authority to address PREA compliance issues as they are identified. The agency conducts internal audits annually, as well as PREA mock audits to prepare for a PREA certification audit. The GEO Group corporate PREA team consists of four PREA managers and one PREA compliance specialist. The PREA Coordinator explained he</p>

	<p>has the support of the agency head to effectively engage in his role as PREA Coordinator.</p> <p>Rio Grande Processing Center has a PCM on site. They report directly to the facility head and their assigned corporate PREA manager. An interview with Rio Grande Processing Center's PCM indicated he had sufficient time and authority to fulfill his duties as PCM. He stated he has the full support of the facility leadership and receives guidance from the corporate PREA team regularly.</p> <p>The agency and facility organizational charts were reviewed and determined the PREA Coordinator and PCM has the appropriate reporting lines to fulfill their duties.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Rio Grande Processing Center does not contract with other agencies to confine detainees on their behalf. Rio Grande Processing Center has a contract with the United States Marshals Service (USMS) to house its detainees. A copy of the current contract was provided for review. The USMS contract contains information about Rio Grande Processing Center's responsibility to comply with the PREA standards and undergo regularly scheduled PREA audits by a Department of Justice certified PREA auditor.</p> <p>USMS monitors compliance through regular contract monitoring and site reviews.</p> <p>Rio Grande Processing Center complies with this standard.</p>

<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.13.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" and "Selection, Retention and Orientation (300.01)" for review. It was concluded that the policies contained the</p>

required language to align with the elements of the standard.

Rio Grande Processing Center submitted its approved staffing plan which ensures adequate staffing levels to protect detainees from sexual abuse. The staffing plan provides security staff as well as case managers, facility leadership, administrative support, kitchen, medical and mental health staff. Rio Grande Processing Center submitted its annual facility assessments that contain all the components which need consideration when identifying staff needs. Rio Grande Processing Center stated they did not have any deviations from the staffing plan during the audit period. When callouts and time off occur, Rio Grande Processing Center the facility head ensures shift coverage through voluntary and mandatory overtime. Program delivery may be adjusted. A staff schedule was also provided for review. During the site review, security staff were observed in the housing units, hallways, group, kitchen, and recreation areas.

Rio Grande Processing Center supervisory staff conduct and document unannounced rounds once per shift. Unannounced rounds forms were submitted pre-audit and additional unannounced rounds forms were reviewed during the on-site tour. Staff are prohibited from alerting each other that unannounced rounds are being conducted. At the facility administrator's discretion, staff face disciplinary action if they are found to have alerted other staff when unannounced rounds are being conducted.

Additionally, while on-site, the facility head, PCM and four supervisory staff were interviewed. The facility head and PCM confirmed they comply with the staffing plan mostly through voluntary and mandatory overtime. Shift supervisors discussed the unannounced rounds practice and were able to articulate what they look for when conducting unannounced rounds. Fourteen random staff interviewed confirmed supervisors conduct unannounced rounds at least once per shift. The facility head indicated there would be corrective action for staff who alert other staff unannounced rounds are in progress. Thirty-four detainees were interviewed and confirmed they regularly see security and supervisory staff in housing units, recreation areas and other common areas throughout the facility. All detainees interviewed indicated they feel safe at Rio Grande Processing Center.

Lastly, Rio Grande Processing Center employs video surveillance and security mirrors. Rio Grande Processing Center submitted facility floor plans with camera locations. All cameras were operational at the time of the on-site visit. The cameras are monitored from several areas in the facility; the facility administrator and the Major's office and in the center control area. Security staff monitor cameras on all shifts. The facility security mirrors throughout the facility enhance staff's ability to prevent and detect sexual abuse.

Rio Grande Processing Center exceeds compliance with this standard.

	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.14</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" and "Selection, Retention and Orientation (300.01)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center does not house detainees under the age of 18. Interviews with Rio Grande Processing Center staff and on-site observations confirmed there were no detainees under the age of 18. A review of the detainee roster during the on-site confirmed there were no detainees under the age of 18.</p> <p>Rio Grande Processing Center complies with this standard.</p>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.15.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)", "Searches of Detainees and Facility (900.08)" and "Recreation Program (2200.01)" for review. It was concluded that the policies contained the required language to align with the elements of the standard. Rio Grande Processing Center submitted the PREA training curriculum, including pat search procedures and training records.</p> <p>Rio Grande Processing Center houses female and male detainees. Opposite gender strip and body cavity searches are prohibited absent exigent circumstances. Rio Grande Processing Center maintains a strip search log. A review of the strip search log confirms male staff conduct strip searches on male detainees and female staff conduct strip searches on female detainees. Body cavity searches are only done with authorization of the facility administrator and by an outside health services provider.</p>

	<p>While on-site, thirty-four detainees were randomly selected and interviewed. The detainees confirmed they are pat and strip searched by same gender facility staff.</p> <p>Twenty-three facility staff, including fourteen random staff, twelve specialized, four supervisory staff, and five medical/mental health staff as well as the PCM and facility head were interviewed. They confirmed the facility does not conduct body cavity searches on-site. Pat and strip searches are conducted by same gender staff. They were consistent with their answers that all staff are prohibited from pat searching opposite gender detainees outside of exigent circumstances. All staff interviewed were able to articulate they use "the back of the blade of the hand" to pat search a detainee's intimate areas. All facility staff receive pat and strip search training even though they are not permitted to pat search male detainees.</p> <p>An extensive site review was conducted in all areas of the facility. During the site review, appropriate privacy was provided for detainees to use the bathroom, shower and change their clothes without being seen by opposite gender, non-medical staff. PREA shower curtains were in all showers and in good condition. Toilets and urinals were blocked from view of opposite gender non-medical staff. Interviews with female staff indicated they do not enter housing unit bathrooms unless they are "cleared" by male staff. All privacy barriers were in good condition. All detainees interviewed stated they had adequate privacy to use the bathroom, shower, and change their clothes without being seen by opposite gender, non-medical staff.</p> <p>Opposite gender staff are required to announce their presence when entering detainee housing units. During the site review, opposite gender signage to remind staff to announce themselves was observed at the housing unit doors. Opposite gender staff were observed announcing their presence at the housing unit entrance and at the entrance to each bathroom entered. Opposite gender announcements were observed as being loud enough for detainees to hear it. All detainees interviewed stated all female staff who enter the housing units announce themselves at the entrance and the bathroom door. All staff interviewed confirmed opposite gender staff announce themselves on the housing unit.</p> <p>Rio Grande Processing Center complies with this standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.16.

	<p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>PREA orientation and education informational materials are provided in English and Spanish. This includes PREA posters in housing units, detainee handbooks and PREA pamphlets. Rio Grande Processing Center has many staff who are primarily relied upon to communicate with detainees Spanish and translate written PREA information. When they are not available and a detainee requests an interpreter or speaks another language, Rio Grande Processing Center has a contract with Big Language for interpretation services. The Big Language contract was reviewed. PREA materials are also available in large print.</p> <p>The PCM was interviewed on-site. He discussed the Big Language procedure and produced information provided to the staff on how to access interpretation services. During the on-site review, the Big Language information was observed in staff offices/areas and in center control. Big Language was contacted and provided with the Rio Grande Processing Center's account number. The representative confirmed Rio Grande Processing Center has an active contract with them for interpretation services. PREA posters around the facility were in English and Spanish. The PREA detainee education video was reviewed and was available in English, Spanish, with closed captions and ASL for the hearing impaired. One intake staff was interviewed and stated they would read the PREA education materials to detainees who could not read or were blind/low vision. Twenty-three staff interviewed reported Rio Grande Processing Center does not allow for the use of detainee interpreters for PREA-related allegations, absent immediate safety concerns and completion of first responder duties.</p> <p>Fifteen of thirty-four detainees required an interpreter during the interview. All detainees interviewed confirmed PREA information, including detainee handbooks, PREA videos and PREA written information are available in Spanish and in formats they understand.</p> <p>There were no detainees who were blind/low vision, deaf/hard of hearing, or who had intellectual, mental or another disability.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents

provided, and observations made during the site review were considered to determine compliance with standard 115.17.

Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” and “Selection, Retention and Orientation (300.01)” for review. It was concluded that the policies contained the required language to align with the elements of the standard.

While on site, the Human Resource (HR) manager was interviewed. The HR files were well organized and the system she uses to stay current with updated background checks is excellent. She is responsible for staff, contractor and volunteer background checks, as well as new hire and promotion documentation. Background checks include sources such as state motor vehicle, state criminal and NCIC records.

Potential employees must answer PREA-related questions (a 1-3) about past sexual misconduct/convictions on the initial web-based job application. Newly hired employees receive an agency and US Marshalls Services background check. All employees seeking a promotion must complete a background check at the time of their promotion application. In addition, they must answer the PREA-related questions about past sexual misconduct/convictions. All staff and contractors are subject to initial background checks and updated background checks at least every five years.

Twenty-three staff HR files, including newly hired and recently promoted staff, were randomly selected for review. Employees selected were of varying positions and years of service. All HR files reviewed contained the required documentation, including answers to the PREA-related questions about sexual misconduct/convictions (new hire/promotions) and initial and five-year background checks. The HR manager discussed the process for on-boarding new employees, conducting updated background checks on existing and promoted staff. She discussed how regular communication with the US Marshalls Service and The GEO Group regional and corporate HR personnel ensures all background check information is submitted by current and prospective employees. The HR manager stated no employee begins employment at the facility without a completed background clearance. The HR files contained the appropriate releases of information as well as background clearance approval. Any staff who reports they have worked in a confinement facility receive a "PREA check". This check includes contacting prior employers to determine if the prospective employee had a substantiated PREA allegation against them or resigned during a PREA investigation. The agency provides this information to other confinement employers who are considering hiring a former Rio Grande Processing Center employee.

Although it is not required by the standard, all volunteers receive a background check through The GEO Group or the US Marshalls Service. Volunteers may not enter the facility until they are approved to provide services to detainees. Volunteers must submit to periodic background checks and those who do not pass the background check are prohibited from entering the facility.

Staff are required to answer PREA-related questions about past sexual misconduct/convictions during annual performance evaluations. Staff have an affirmative duty to

	<p>report all law enforcement involvement immediately. Lastly, material omissions or providing false information by employees, contractors and volunteers regarding sexual misconduct is grounds for termination of employment.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.18.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>There were no significant facility enhancements or modifications during the audit period. There were no significant video monitoring upgrades during the audit period.</p> <p>An interview with PCM confirmed there were no significant facility enhancements, modifications or video monitoring upgrades during the audit period. The PCM stated he would be part of meetings if enhancements or upgrades were being considered.</p> <p>An interview with the facility head confirmed he would consider, at a minimum, blind spots, sight lines and privacy if upgrades or enhancements were considered. He stated he would involve the PCM in all meetings where facility upgrades or enhancements were being discussed.</p> <p>Rio Grande Processing Center is compliant with this standard.</p>

<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to</p>

	<p>determine compliance with standard 115.21.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center has a Memorandum of Understanding (MOU) with Pillar Medical and Mental Health Services for victim advocacy, crisis intervention and hospital/investigation interview accompaniment. The MOU covers forensic medical exams at either Laredo Medical Center or Pillar Medical Clinic. The MOU is dated 4/28/2025. This agency was contacted and confirmed they have an active MOU with Rio Grande Processing Center for forensic medical exams. victim advocacy, crisis intervention and hospital/investigation interview accompaniment. Posters throughout the facility contained Pillar Medical and Mental Health Services contact information.</p> <p>Five specialized medical and mental health staff were interviewed on-site. They confirmed when a detainee returns to the facility after a forensic exam, medical and mental health services are provided in accordance with the hospital’s discharge summary. Thirty-four random detainees were interviewed. Although most of them did not know the exact services provided by Pillar Medical and Mental Health Services, they did know that they provide services specific to sexual abuse and that their information was readily available throughout the facility. Twenty-four random security staff was interviewed, and they were able to articulate their duties to report all sexual abuse and sexual harassment and preserve evidence.</p> <p>Rio Grande Processing Center does not conduct criminal sexual abuse or sexual harassment investigations. The Webb County District Attorney’s Office is responsible for all criminal sexual abuse and sexual harassment investigations made at Rio Grande Processing Center and their prosecution if appropriate. Rio Grande Processing Center had no allegations of sexual abuse referred for criminal investigation and prosecution.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.22.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault</p>

	<p>Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>The Webb County District Attorney’s Office is responsible for investigating all allegations of criminal sexual abuse and sexual harassment at Rio Grande Processing Center. All sexual abuse and sexual harassment allegations receive an administrative and/or criminal investigation. Rio Grande Processing Center accepts verbal, written, third party and anonymous reports of sexual abuse and sexual harassment and refers all sexual abuse and sexual harassment allegations for investigation. The GEO Group's website was reviewed. It was verified that the investigation policy is publicly posted on The GEO Group's website.</p> <p>Two facility investigators were interviewed about the sexual abuse and sexual harassment investigation process. They discussed the process to refer an allegation for criminal investigation, and their responsibility to cooperate with outside law enforcement investigations. The investigators stated they work closely with the PCM to investigate and close administrative investigations in a timely manner. They also indicated they remain in contact with local law enforcement to stay informed of the status until the investigation is complete.</p> <p>Rio Grande Processing Center had twenty-one sexual abuse or sexual harassment allegations in 2023; twenty-three sexual abuse or sexual harassment allegations in 2024; and one sexual abuse allegation in 2025. Rio Grande Processing Center provided its PREA tracking log. The PCM was interviewed and stated he keeps tracking logs so he can follow up with internal investigators on the status of investigations assigned to them. He also uses it to compile sexual abuse and sexual harassment data.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.31</b>	<b>Employee training</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.31.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p>

	<p>Rio Grande Processing Center provided the PREA staff training curriculum for review. The PREA staff training curriculum is developed, revised and approved by the PREA Coordinator. It was determined the PREA staff training curriculum contained all the required topics: : zero tolerance; reporting responsibilities; staff and detainee right to be free from sexual abuse and retaliation; dynamics of and common reactions to sexual abuse in confinement; how to detect threatened or actual sexual abuse; avoiding inappropriate relationships with detainees; effective communication with detainees; and, compliance with mandatory reporting laws. PREA Training Acknowledgements were provided for review. PREA Training Acknowledgements indicate staff received and understood the PREA information.</p> <p>An interview with the PREA Coordinator confirmed the PREA training curriculum is reviewed and revised as needed and approved by him. Training records for twenty-three Rio Grande Processing Center staff of varying positions and lengths of service were randomly selected for review. Staff training transcripts and acknowledgements were provided and reviewed. It was confirmed that staff receive PREA training prior to having contact with detainees and annual PREA refresher training. Interviews with the PCM and facility head confirmed PREA training is required before staff can have contact with the detainees. They stated PREA information is regularly reviewed at staff meetings, shift briefing, and department head meetings. PREA training is provided in-person and online.</p> <p>Interviews with twenty-three staff confirmed they are knowledgeable of and understand the required components of the standard (a 1-10). Staff interviewed stated they receive PREA training prior to having contact with detainees and annually. They stated they also get PREA information at regular intervals from supervisory staff. Lastly, staff stated PREA information is readily available throughout the facility.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.32.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Contractors and volunteers receive PREA Training consistent with the type and</p>

amount of contact they may have with detainees. At a minimum, they are provided with information on Rio Grande Processing Center's zero tolerance policy and the consequences for violating it. They are also informed of their responsibility to immediately report to Rio Grande Processing Center staff any knowledge, information, or suspicion of sexual abuse and sexual harassment.

The contractor and volunteer PREA Orientation and Training curriculum and PREA Read & Sign information were provided. For contractors and volunteers with similar access to detainees as facility staff, it was determined the PREA training contained considerably more PREA information than required as it is the same training facility staff receive. Additional information included dynamics of and common reactions to sexual abuse, effective communication with all detainees and ways to avoid inappropriate relationships with detainees. Contractor and volunteer training acknowledgements were provided for review.

At the time of the on-site, Rio Grande Processing Center had eleven contractors and seven volunteers. Interviews with the facility head and PCM confirmed contractors and volunteers receive PREA training at Rio Grande Processing Center before having contact with detainees.

One contractor was interviewed on-site, and one volunteer was contacted by telephone. They confirmed they were provided with PREA training prior to having contact with detainees. They were able to articulate their responsibility to report all sexual abuse and sexual harassment information immediately to facility staff. Lastly, they confirmed they receive annual PREA training and receive PREA information periodically throughout the year.

Rio Grande Processing Center exceeds compliance with this standard.

115.33	Inmate education
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.33.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center provided the detainee PREA information documents, including the PREA pamphlet, PREA signage and detainee handbooks in English and</p>

Spanish. A review of The PREA pamphlet verified it contains the following PREA information: zero tolerance; how to report incidents or suspicions of sexual abuse or sexual harassment; right to be free from retaliation; and the facility policy and procedure for responding to incidents. The facility has many Spanish speaking staff who are relied upon to translate for detainees. The facility staff have access to Big Language for translation services for detainees who request it or speak other languages. PREA information is printed in large print.

An interview with one staff member responsible for detainee intake confirmed written PREA information is provided at intake. This information is provided through detainee handbooks and PREA pamphlets in English and Spanish. Intake staff stated she would read the PREA information to detainees who have difficulty reading or comprehending. The facility policy states that intake staff have 24 hours to provide PREA information; however, the staff interviewed stated it is provided in the intake packet given to the detainee upon arrival at the facility. The PREA video is available in the intake area holding cells.

The PCM was interviewed and confirmed detainees are shown a video titled "PREA-What You Need to Know" as a structured and monitored activity within 30 days of intake. The video was viewed, and it is in English and Spanish with subtitles and ASL interpretation. The PCM and intake staff stated they are available during the intake process and comprehensive PREA education for detainees to ask questions about the PREA information. They stated case managers and housing unit staff are also available to discuss PREA information with detainees, if needed.

Rio Grande Processing Center provided detainee receipts for PREA information at intake and for comprehensive PREA education.

Thirty-four detainees were formally interviewed about the PREA education and orientation they received at intake and during comprehensive PREA education. All detainees recalled receiving a PREA information pamphlet and detainee handbook at intake. Detainees confirmed they were shown a "PREA video" within 30 days of arrival at the facility. All detainees knew how to access the PREA reporting line and outside confidential support services. During the site review, thirteen detainees were informally asked about the PREA information they received. All detainees, except two, were able to produce a detainee handbook and PREA Education pamphlet and recalled seeing a PREA video.

Lastly, during the site review, PREA posters were observed throughout the facility in English and Spanish. They were in good condition. The information was current.

Rio Grande Processing Center is compliant with this standard.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>

	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.34.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard. Rio Grande Processing Center provided the PREA Specialized Investigations Training curriculum. It was reviewed and contained the required elements of the standard (b).</p> <p>Rio Grande Processing Center conducts administrative sexual abuse and sexual harassment investigations. The Webb County District Attorney’s Office is responsible for conducting criminal sexual abuse and sexual harassment investigations.</p> <p>Specialized PREA Investigation Training certificates and PREA Basic Training acknowledgements were provided for two facility PREA investigators. They have the required training to conduct administrative PREA investigations.</p> <p>Rio Grande Processing Center exceeds compliance with the standard.</p>
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p>
	<p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.35.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center provided the PREA Specialized Medical and Mental Health training curriculum for review. It was determined to meet the elements of the standard (a 1-4). The PREA Specialized Medical and Mental Health training curriculum is developed, reviewed and approved by the corporate medical team and the PREA Coordinator. It is revised as needed. Rio Grande Processing Center medical staff do not conduct forensic medical exams.</p> <p>An interview with the Health Services Manager confirmed all medical and mental health staff receive the general staff PREA training under 115.31, prior to having</p>

	<p>contact with detainees. They stated medical and mental health staff must complete the PREA Specialized Medical and Mental Health during their initial training period.</p> <p>Training records for five medical and mental health staff were requested. Training transcripts and PREA Basic Training Acknowledgements for medical and mental staff were reviewed and confirmed Rio Grande Processing Center medical and mental health staff complete both trainings and sign they understood the information included in the trainings. Interviews with five medical and mental health staff confirmed they are knowledgeable of the facility PREA practices and their responsibilities to preserve potential forensic evidence when providing immediate medical care to alleged sexual abuse victims. They reported they receive annual basic PREA training and periodically PREA information is reviewed and discussed in department staff meeting. PREA signage and information was available in the medical and mental health treatment and waiting areas.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.41.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>The PREA Risk Assessment and PREA Vulnerability Reassessment Questionnaire were reviewed. The PREA Risk Assessment includes all the required elements of the standard (d 1-9 and e). The PREA risk assessment has a score threshold to objectively determine detainees who are risk for victimization or abusiveness. The PREA Vulnerability Reassessment Questionnaire addresses PREA-related issues that can change over time, such as the detainees continued thoughts about their safety in the general population, and if they have been approached for sex, threatened or beaten up because of sexually abusive contact or sexual requests. According to the PREA Standard, detainees must be PREA risk assessed within 72 hours of arrival; they must receive a PREA risk assessment within 30 days of intake.</p> <p>Two facility staff responsible for conducting PREA risk assessments and the PCM were interviewed about the PREA Risk Assessment and Reassessment procedure. Facility policy provide 24 hours to conduct the PREA Risk Assessment; however, they</p>

	<p>reported the initial PREA Risk Assessment is conducted at intake. The PREA Risk Assessment staff and PCM stated detainees are PREA risk assessed prior to being assigned to a housing unit and bed. The PCM indicated PREA reassessments are conducted between 25-30 days from intake. The PREA Risk Assessment staff and PCM discussed the process of conducting the PREA risk assessments. They reported they encourage detainees to answer the questions honestly and inform newly admitted detainees Rio Grande Processing Center values their sexual safety. PREA Risk Assessments and Reassessments are conducted in a private area where the detainees' answers cannot be overheard by staff and other detainees. The PREA Risk Assessment staff stated they score the PREA risk assessment using the required scoring system and inform the PCM when a detainee scores at risk for victimization or abusiveness. The PREA Risk Assessment staff provide a mental health referral to all detainees who score at-risk for victimization or abusiveness. Detainees may refuse the referral and often do; however, detainees who accept it are provided with a mental health evaluation within 14 days of intake. Follow up mental health evaluations are conducted by mental health staff.</p> <p>Thirty-four detainees were randomly selected and interviewed. All detainees recalled being asked PREA-related questions at intake. Seven detainees were not eligible for PREA reassessment at the time of the audit. Twenty-seven detainees remembered facility staff asking follow-up PREA questions. A review of their PREA risk assessments at intake confirmed they were conducted on their arrival day. All detainees eligible for a PREA reassessment had one completed within 30 days.</p> <p>The facility has controls in place for only staff who need to know are informed of a detainee's at-risk status. Facility staff with access to the at-risk information include the facility administrator, PCM, Major, and shift supervisors.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.42.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center provided PREA Risk Assessments and its at-risk log for</p>

	<p>review. Interviews with the two PREA Risk Assessment staff and the PCM indicated a detainee’s risk level for victimization and abusiveness is considered when making bed, housing, school, work and other programming decisions with the goal of keeping detainees at risk for victimization separated from detainees at risk for abusiveness. The at-risk log confirmed detainees at risk for victimization are not housed with detainees for abusiveness. Interviews with the facility administrator, PCM and shift supervisors stated the at-risk log is consulted prior to making housing and bed decisions to keep potential victims and potential abusers separate. They confirmed frontline security staff cannot make housing, and bed moves with the approval of a supervisor. The at-risk information is controlled and is available on a need-to-know basis.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.43.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>An interview with the facility head and PCM confirmed Rio Grande Processing Center does not use involuntary protective custody or segregation for detainees who score at risk of victimization. They confirmed the facility did not have any detainees who required involuntary protective custody or segregation for detainees who score at risk of victimization during the audit period.</p> <p>Interviews with 23 staff, including one restricted housing unit supervisor, confirmed they are aware of the policy in place for using involuntary protective custody or segregation for detainees who score at risk of victimization. All 23 staff stated they did not know of any detainee who were housed in involuntary protective custody or segregation due to their PREA risk for victimization.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>

<b>115.51</b>	<b>Inmate reporting</b>
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.51.

Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.

Rio Grande Processing Center provides multiple way for detainees to report allegations of sexual abuse and sexual harassment, retaliation for reporting allegations and staff misconduct that may have contributed to an incident of sexual abuse or sexual harassment, including verbally, in writing, anonymous, third party, and via reporting hotlines. Detainees may report verbally or in writing to any staff, contractor, or volunteer. Detainees can report an allegation directly to the GEO Group PREA Coordinator. The Office of the Inspector General provides a reporting hotline. Detainees are informed at intake and during PREA orientation of the reporting mechanisms. The reporting information is provided to detainees in handbooks, the PREA pamphlet, and PREA postings throughout the facility. All PREA materials are available in English and Spanish.

During the site review, the PREA reporting hotline to the Office of the Inspector General was tested and the call was connected. The representative confirmed detainees at Rio Grande Processing Center can file an allegation of sexual abuse or sexual harassment with their office and that the report is immediately forwarded to the facility. PREA signage was posted throughout the facility, including housing areas, food service, medical/mental health and recreation areas. The PREA postings contained the current information. All PREA signage was in good condition. The facility has many bilingual staff and access to Big Language for interpretation services for the purposes of filing an allegation of sexual abuse or sexual harassment. All detainees have access to telephones in the housing units that can be used privately. PREA reporting signs are near the phone in all detainees housing units.

Detainees can access confidential support services via hotline or mail. Detainee letters addressed to the agency are not read and treated like legal mail.

The GEO Group provides staff with multiple ways to privately report an allegation of sexual abuse or sexual harassment. There is an email address and toll-free Employee Hotline staff can call to report an allegation of sexual abuse or sexual harassment. Rio Grande Processing Center staff can contact the agency PREA Coordinator directly.

Twenty-three staff were interviewed. All staff were aware of the multiple reporting options for detainees to report sexual abuse, sexual harassment, retaliation, or staff misconduct that may have contributed to an incident of sexual abuse or sexual

	<p>harassment. Staff reported they can receive allegations verbally, in writing, anonymously and through third parties. All staff were aware of their duty to immediately all allegations of sexual abuse or sexual harassment. Staff were aware there is an Employee Hotline and email where they can report allegations. Lastly, the staff was aware they could report to the agency PREA Coordinator.</p> <p>Thirty-four detainees were interviewed, and all were aware of the multiple ways they can report allegations of sexual abuse, sexual harassment, retaliation, or staff misconduct that may have contributed to an incident of sexual abuse or sexual harassment. The detainees reported there was at least one Rio Grande Processing Center staff whom they felt comfortable enough with to make a verbal report of a sexual abuse or sexual harassment. Detainees reported that they think facility staff take PREA reports seriously. All the detainees stated they were aware they could report in writing, verbally, anonymously, and via third party. All the detainees were aware that the Office of the Inspector General is an external reporting entity. The detainees noted there is PREA information on posters around the facility. During the site review, thirteen detainees were informally asked about the PREA information they received. All detainees, except two, were able to produce a detainee handbook and PREA Education pamphlet and recalled seeing a PREA video.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.52.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center detainees may submit a grievance related to sexual abuse and sexual harassment; however, any detainee grievance containing a sexual abuse or sexual harassment allegation is immediately forwarded to the PCM and referred for investigation. There are locked grievance boxes in common areas around the facility. Only the Grievance Coordinator has the key to the boxes, and the boxes are emptied at least once a day. Detainees do not have to follow an informal process to resolve the grievance, and they do not have to submit or refer a grievance to the staff who are the subject of the allegation. There is no time frame to submit a grievance related to sexual abuse or sexual harassment.</p>

	<p>An interview with the grievance coordinator confirmed grievances are collected from the locked boxes at least once per day. Although there were several sexual abuse or sexual harassment allegations filed through a grievance during the audit period, all were answered immediately indicating the sexual abuse or sexual harassment allegation was referred for investigation. The grievance coordinator verified they immediately forward sexual abuse and sexual harassment allegations to the PCM and the facility head for investigation. Because sexual abuse and sexual harassment grievances are immediately forwarded for investigation, the relevant time frames are not exceeded.</p> <p>An interview with the PCM confirmed the sexual abuse and sexual harassment grievance process. The PCM verified if he receives sexual abuse and sexual harassment grievances they are immediately forwarded for investigation.</p> <p>Finally, an interview with the facility head confirmed the grievance process for sexual abuse and sexual harassment allegations. He stated sexual abuse and sexual harassment grievances are forwarded to him and the PCM; the PCM is responsible for referring the allegation for investigation. The facility head stated Rio Grande Processing Center could discipline detainees for filing a sexual abuse or sexual harassment grievance in bad faith but rarely do because the facility wants to maintain a healthy reporting culture.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>: A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.53.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center has an MOU with Pillar Medical and Mental Health Services dated 4/28/2025, for the provision of outside confidential support services for detainees who have experienced sexual abuse or sexual harassment. Pillar Medical and Mental Health Services was contacted and the representative confirmed there is an active MOU with Rio Grande Processing Center.</p> <p>Rio Grande Processing Center provides detainees with access to outside confidential</p>

	<p>emotional support services through Pillar Medical and Mental Health Services. Detainees at Rio Grande Processing Center can call the Pillar Medical and Mental Health Services hotline without using a PIN. Detainees are also provided with the address to write Pillar Medical and Mental Health Services to request confidential support services.</p> <p>During the site review, PREA posters were observed in the housing areas, common areas, medical and mental health offices, and recreation areas. The PREA posters contained the current information and were in good condition. PREA postings are available in English and Spanish. Detainees are provided with the outside confidential emotional support services information at intake and orientation through detainee handbooks and PREA pamphlets. Thirty-four detainees were interviewed and although they were not aware of the specific services Pillar Medical and Mental Health Services provides, they did know how to access the services if needed. All detainees interviewed stated the PREA information is posted throughout the facility.</p> <p>Facility staff are not permitted to read detainee correspondence to or from Pillar Medical and Mental Health Services.</p> <p>Twenty-three staff were interviewed, and they were aware of the services Pillar Medical and Mental Health Services can provide to detainees.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents uploaded to the OAS was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.54.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>The GEO Group provides a third-party reporting telephone line and email where family members and friends of detainees assigned to Rio Grande Processing Center can report sexual abuse or sexual harassment on behalf a detainee. The third-party reporting information is posted on the GEO Group website. Third party reporting information is posted in the facility in the following areas: lobby, visitation, and other areas accessible to the public.</p>

	<p>During the site review, third party reporting signs were observed in public areas of the facility such as the lobby, and visitation. Twenty-three staff were interviewed and confirmed they are aware of the third-party reporting options. Thirty-four detainees were interviewed and verified they are aware of the third-party reporting options. Detainees stated they received PREA information in the detainee handbook and PREA pamphlet that contained the third-party reporting information.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.61.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center did not have any sexual abuse or sexual harassment allegation involving a detainee under the age of 18 or considered part of a vulnerable population. Information about the Texas mandatory reporting laws was submitted.</p> <p>Twenty-three facility staff, one contractor, one volunteer, the PCM and facility administrator were interviewed. All Rio Grande Processing Center staff, contractors and volunteers are required to report all knowledge, suspicion, and information regarding an allegation of sexual abuse or sexual harassment, retaliation and misconduct that may have been contributed to an incident. All staff, contractors and volunteers are trained at least annually on their responsibility to immediately report all sexual abuse and sexual harassment incidents. Staff are required to immediately report all allegations reported to them regardless of the reporting method. Staff must forward to supervisors all verbal, written, anonymous and third-party sexual abuse or sexual harassment reports immediately. Staff are aware there is an Employee Hotline where they can privately report sexual abuse and sexual harassment.</p> <p>Thirty-four detainees were interviewed and all reported Rio Grande Processing Center staff will immediately forward an allegation of sexual abuse or sexual harassment to their supervisor and/or facility leadership. All detainees interviewed reported they feel comfortable with at least one Rio Grande Processing Center staff person to make a sexual abuse or sexual harassment report to them. All detainees interviewed reported that they feel safe at Rio Grande Processing Center, mostly because they</p>

	<p>perceive the staff care about their safety and wellbeing.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.62.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center did not have any detainees who reported they were at substantial risk of imminent sexual abuse during the audit period. Interviews with twenty-three staff confirmed they are aware of the policy and practice that requires them to immediately report when a detainee states they think they are at substantial risk of imminent sexual abuse. All staff interviewed reported they have not received a report of substantial risk of imminent sexual abuse.</p> <p>Thirty-four detainees were interviewed and reported staff protect vulnerable detainees and immediately respond to all reports of sexual abuse and sexual harassment, including ones where a detainee indicates he is at substantial risk of imminent sexual abuse.</p> <p>Interviews with the facility head and PCM confirm there were no reports from detainees about substantial risk of imminent sexual abuse.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to</p>

	<p>determine compliance with standard 115.63.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center received two allegations from a detainee who reported they were the victim of sexual abuse while incarcerated at another confinement facility during the audit period. Rio Grande Processing Center received one notification from another confinement facility that a detainee alleged they were the victim of sexual abuse while incarcerated at Rio Grande Processing Center during the audit period. Two sexual abuse reports were forwarded to the other confinement facility within 72 hours. One sexual abuse allegation from another facility was referred for investigation.</p> <p>An interview with two PREA Risk Assessment staff confirmed they are likely the staff detainees will report sexual abuse that occurred at another confinement facility because they complete the PREA Risk Assessment and Reassessment. They are aware they are required to immediately report sexual abuse that occurred at another facility to the facility head.</p> <p>Interviews with the facility head and PCM confirmed there were two reports from another confinement facility alleging sexual abuse that occurred at the Rio Grande Processing Center. The facility head confirmed they received one report where a detainee alleged they were the victim of sexual abuse at Rio Grande Processing Center. All reports were forwarded to the other confinement facility or referred for investigation within the required timeframe. It was confirmed documentation of all notifications are maintained on site by the PCM.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.64.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p>

	<p>All Rio Grande Processing Center staff are trained in their first responder duties. First responder duties include separating the victim and abuser; notifying supervisors; preserve and protect the crime scene and potential evidence; request victims not take any actions to destroy evidence such as wash, brush teeth, eat, drink, and smoke; ensure the perpetrator not take any actions to destroy evidence such as wash, change clothes, brush teeth, eat, and drink. All staff involved in responding to an incident of sexual abuse are required to keep information confidential, except for providing information to supervisors and facility leadership.</p> <p>Twenty-three staff were interviewed, and all staff were able to articulate their first responder duties. All staff are provided with and are required to carry a first responder card that details all the first responder duties. Staff report carrying the card ensures they can remember and follow the first responder duties. All staff interviewed had a first responder card in the possession.</p> <p>Interviews with the facility head and PCM confirm that all staff are trained in first responder duties and are provided with first responder cards when they are new employees. First responder cards are available from the PCM and shift supervisors when the original first responder cards are damaged. The facility head and PCM confirmed there were thirteen sexual abuse allegations reported requiring first responder duties to be completed during the audit period.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents uploaded to the OAS was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.65.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center provided a Coordinated Response Plan dated 1/6/2025. The Coordinated Response plan is reviewed annually and updated when appropriate. The Coordinated Response Plan outlines the duties of the following staff when an allegation of sexual abuse or sexual harassment is made: first responders, facility leadership, shift supervisors, medical and mental health staff, and investigators. The Coordinated Response Plan is maintained with other emergency procedures.</p>

	<p>Twenty-three staff interviewed were aware a Coordinated Response Plan is available to direct the response to an incident of sexual abuse or sexual harassment. Staff were aware of the location of the Coordinated Response Plan. All staff stated the Coordinated Response Plan is reviewed and discussed at staff meetings and shift briefings periodically.</p> <p>Interviews with the facility head and PCM verified a Coordinated Response Plan is maintained at the facility and is stored with the other facility emergency procedures. It is revised as needed. They confirmed staff is trained in the Coordinated Response Plan and when to use it.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.66.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center does not have a collective bargaining agreement with any unions. No Rio Grande Processing Center staff are members of a union.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.67.</p>

Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.

Rio Grande Processing Center has policy and practice in place that require detainees who report sexual abuse and sexual harassment be monitored for retaliation once per week for at least 90 days. Retaliation Monitoring is required to begin within seven days of the sexual abuse or sexual harassment being reported. The PCM is the designated detainee retaliation monitor and the HR manager is the designated staff retaliation monitor at Rio Grande Processing Center. Facility staff and detainees who report an allegation, witness an incident or cooperate with an investigation receive retaliation monitoring. Rio Grande Processing Center stops retaliation monitoring before 90 days when a detainee is released from their custody, or the outcome of the investigation is unfounded. Facility staff and detainees are monitored for retaliation for 90 days unless there is reason to extend it.

Retaliation monitoring logs reviewed. There were no detainees currently being monitored for retaliation during the on-site. The PCM and HR manager reported no facility staff received retaliation monitoring during the audit period and there were no staff currently being monitored for retaliation during the on-site. The PCM stated he meets privately with detainees to conduct retaliation monitoring interviews. He follows up on any allegations of retaliation that are reported to him. The PCM reviews detainee housing unit changes, disciplinary reports, work assignments and activity participation. As part of retaliation monitoring, the HR manager would review staff disciplinary reports, shift changes, and denied requests for vacation/PTO as well as interviewing them privately.

Interviews with twenty-three staff confirmed they are aware that retaliating against staff or detainees who report sexual abuse or sexual harassment, witness an incident or cooperate with an investigation is not tolerated. All staff interviewed stated they were neither aware of any retaliation incidents, nor currently under retaliation monitoring.

Interviews with the facility head and PCM confirmed staff and detainees who report a sexual abuse or sexual harassment allegation, witness an incident or cooperate with an investigation receive retaliation monitoring. The facility head stated retaliation by staff or detainees is not allowed and is not tolerated. The facility head and PCM reported there are no staff or detainees currently being monitored for retaliation for reporting an allegation or cooperating with an investigation. The facility head confirmed retaliation monitoring is at least 90 days; it can be extended for cause. He stated retaliation monitoring is halted if a detainee is released from the facility’s custody or the investigation outcome is unfounded. The facility head stated the PCM is required to report all retaliation monitoring incidents to him. Lastly, he stated retaliation allegations are immediately referred for investigation.

Rio Grande Processing Center exceeds compliance with the standard.

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.68.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>An interview with the facility head and PCM confirmed Rio Grande Processing Center does not use involuntary protective custody or segregation for detainees who have suffered sexual abuse. They confirmed the facility did not have any detainees who required involuntary protective custody or segregation for detainees who suffered sexual abuse during the audit period.</p> <p>Interviews with 23 staff confirmed they are aware of the policy in place for using involuntary protective custody or segregation for detainees who suffered sexual abuse. All 23 staff stated they did not know of any detainee who was housed in involuntary protective custody or segregation due to making a sexual abuse allegation.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.71.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center conducts administrative investigations of sexual abuse and sexual harassment. All sexual abuse and sexual harassment allegations that</p>

appear criminal are immediately referred to the Office of the Inspector General for investigation.

Criminal sexual abuse and sexual harassment allegations receive an administrative investigation to determine if a policy violation occurred or facility staff contributed to the incident. Where Rio Grande Processing Center staff is the perpetrator of a substantiated allegation, The GEO Group determines if staff will be terminated or disciplined. The presumptive discipline for substantiated sexual abuse allegations is termination. Administrative investigations are conducted by specially trained facility investigators. There were 21 sexual abuse or sexual harassment allegations in 2023. In 2024, there were 23 sexual abuse allegations and one sexual harassment allegations. In 2025, there was 1 sexual abuse allegation. All investigations were closed.

Rio Grande Processing Center cooperates with the Office of the Inspector General personnel and requests periodic updates about the status of an investigation. The Office of the Inspector General is responsible for referring allegations for prosecution.

Two facility investigators were interviewed. Training records provided in 115.34 confirm they have the required basic PREA training and specialized investigation training to conduct PREA investigations. They confirmed their responsibility to immediately refer any sexual abuse allegation that appears to be criminal to the Office of the Inspector General. Both investigators discussed their process for conducting an investigation. They reported they interview the alleged victim and perpetrator, any detainee witnesses, and staff who were on duty at the time of the incident. They stated they also listen to outgoing phone calls, monitor detainee mail, collect and review video footage and review logbook entries. When appropriate, they review forensic examination reports. The investigators stated they are aware that detainees may have an advocate present during forensic medical examinations, court appearances and investigatory interviews.

Interviews with the facility head and PCM confirmed Rio Grande Processing Center must immediately refer all potentially criminal sexual abuse allegations directly to the Office of the Inspector General. They verified all criminal allegations receive an administrative investigation to determine if policy violations or staff actions contributed to the incident. The facility head confirmed sexual abuse allegations require immediate action, and facility staff take their responsibility to report sexual abuse and sexual harassment seriously. The PCM stated the investigators maintain contact with the Office of the Inspector General for all criminal investigation referrals. This ensures the facility is cooperating with the investigation and remains updated on its status.

Rio Grande Processing Center is compliant with the standard.

<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.72.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center investigation staff conduct administrative investigations into sexual abuse and sexual harassment allegations. The investigations training curriculum contains information about the preponderance of the evidence. The facility investigators training documents provided in 115.34 confirm they completed the required training to conduct PREA investigations.</p> <p>Two Rio Grande Processing Center investigators were interviewed, and they were able to articulate the evidentiary standard to determine an administrative PREA investigation outcome. They appear to understand what preponderance of the evidence requires. Administrative PREA investigation reports were reviewed and contain information about how the outcome was determined and that "preponderance of the evidence" was the threshold.</p> <p>Interviews with the facility head and PCM confirmed the evidentiary standard for PREA administrative investigations is preponderance of the evidence. The PCM confirmed preponderance of the evidence is included in completed PREA administrative investigation reports.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.73</b>	<b>Reporting to inmates</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.73.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p>

	<p>Rio Grande Processing Center provides detainees in their custody with notification of the investigation outcome. If the detainee is no longer in the facility’s custody, a notification letter is drafted and filed with the detainee’s classification folder with the intention to serve notification if the detainee returns to their custody. One example was provided where a detainee was released from custody prior to the outcome of the investigation. Two investigation notifications were provided for detainees in custody when the investigation outcome was reached. Since there are several GEO Group facilities in the area, if a detainee is currently in custody at another GEO Group facility, the PCM at Rio Grande Processing Center works with the PCM at the other facility to serve notification of the outcome of the investigation. Completed documentation of notice of outcome is maintained in the investigation file.</p> <p>The PCM is responsible for providing detainees in custody with notification of the investigation outcome. In an interview, he confirmed he provides notification of investigation outcome to detainees in the facility’s custody. He verified he attempts to serve investigation outcome notification to detainees in the custody of another GEO Group facility. Lastly, an investigation outcome notification is prepared and filed with the detainees classification documents. If the detainee returns to Rio Grande Processing Center’s custody, they are provided with the notification.</p> <p>An interview with the facility head confirmed Rio Grande Processing Center serves notification of investigation outcome to detainees in custody. It is provided by the PCM and maintained in the investigation file. The facility head indicated he and the PCM work with staff from other GEO Group facilities in the local area to provide detainees with investigation outcome notification.</p> <p>Rio Grande Processing Center exceeds compliance with the standard.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.76.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center provided The GEO Group Employee Handbook prohibiting staff from engaging in sexual abuse and sexual harassment of detainees. The handbook outlines the zero-tolerance policy for sexual abuse and sexual</p>

	<p>harassment and the consequences for violating it.</p> <p>Twenty-three staff were interviewed and all reported they were aware of the facilities zero tolerance policy for sexual abuse and sexual harassment of detainees and the consequences for violating it. Interviews with the facility head and PCM confirmed the presumptive discipline for staff who are found to have engaged in sexual abuse of detainees is termination. Staff may also be referred for prosecution in cases where there is criminality. Discipline for staff who are found to have engaged in sexual harassment are subject to sanctions that are commiserate with other staff in similar circumstances and with similar prior discipline. Staff with professional licenses will be referred to relevant licensing bodies.</p> <p>There were no staff disciplined for engaging in sexual abuse and sexual harassment of detainees during the audit period.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.77.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Interviews with the facility head and PCM confirmed contractors and volunteers who engage in sexual abuse or sexual harassment of detainees will be removed from contact with all detainees and subject to criminal prosecution. They verified contractors and volunteers with professional licenses will be reported to relevant licensing bodies.</p> <p>There were no contractors or volunteers who were disciplined for sexual abuse or sexual harassment during the audit period.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
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	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.78.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center provided the Detainee Handbook containing the facility rules and prohibited acts. All sexual contact between detainees is a rule violation; however, only abusive sexual contact constitutes sexual abuse. Thirty-four detainees were interviewed and reported they are aware that all sexual contact between detainees is prohibited; however, only abusive sexual contact is considered sexual abuse.</p> <p>All sexual contact between staff and detainees is considered sexual abuse unless it can be proven staff did not consent. Detainees cannot be disciplined for sexual contact with staff unless it is proven staff did not consent. All detainees interviewed were aware that they are unable to consent to sexual acts with staff. Interviews with twenty-three staff confirmed they are aware all sexual contact with detainees considered sexual abuse and it is against the rules. All sexual abuse must be reported immediately.</p> <p>Interviews with the facility head and PCM verified sexual contact between detainees is a rule violation and only considered sexually abusive when coercion is present. They confirmed that all sexual contact between staff and detainees is considered sexually abusive and detainees cannot be disciplined for it unless it is proven that staff did not consent. It was confirmed that there were two detainees disciplined for abusive sexual contact with another detainee during the audit period.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>

A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.81.

Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.

All detainees are PREA risk assessed at intake. When a detainee scores at risk for victimization or abusiveness, they are provided with a mental health referral for follow-up care. Referrals are made immediately and detainees are seen by a mental health practitioner within 14 days of intake. Detainees who score at risk for victimization or abusiveness are also provided with a mental health follow up care if they request it. Documents provided indicated detainees are seen day by a mental health provider well before the 14-day mark.

In 2025, 30 detainees who scored at risk for victimization or abusiveness accepted the mental health referral for follow up care. In 2024, 25 detainees who scored at risk for victimization or abusiveness accepted the mental health referral for follow up care. The PCM provided examples of referrals and mental health case notes for review. Detainees who accepted the mental health referral because of scoring at risk for victimization or abusiveness were seen by a mental health practitioner within 14 days of intake. Case notes provided indicated a correlation between scoring at-risk on the PREA Risk Assessment and the mental health follow-up appointment. An interview with a mental health provider confirmed the process for detainees to receive a referral and follow up care when they score at risk for victimization or abusiveness on the PREA Risk Assessment. The mental health provider stated she routinely sees detainees who score at risk within three days but not more than ten days from their referral.

An interview with the PCM confirmed the facility provides mental health referrals and follow up care when a detainee scores at risk for victimization or abusiveness on the PREA Risk Assessment. The PCM indicated detainees often refuse the mental health referral and follow up care because they don’t want to discuss their history of sexual abuse. Lastly, he confirmed the mental health providers generally meet with detainees who score at risk within three days of the referral, but do not exceed 10 days.

Rio Grande Processing Center exceeds compliance with the standard.

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.82.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center has policy and practice in place to provide detainees who are victims of sexual abuse with timely and unimpeded access emergency medical and mental health care. Emergency medical care consists of sexually transmitted infection (STI) prophylaxis and access to emergency contraception. All treatment services are provided without cost to the detainees and regardless of whether the victim cooperates with the investigation or names the abuser. Forensic exams and emergency medical and mental health care are provided through an MOU with Pillar Medical and Mental Health Services. The MOU is dated 4/28/2025.</p> <p>Interviews with five medical and mental staff confirmed they determine what emergency medical and mental health services should be provided when a detainee reports an incident of sexual abuse. Medical and mental health staff confirmed there were no sexual abuse incidents where detainees were referred for emergency medical and mental health services during the audit period.</p> <p>Interviews with the PCM verified no detainees were referred for emergency medical and mental health services during the audit period.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents uploaded to the OAS was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.83.</p> <p>Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the</p>

	<p>standard.</p> <p>Rio Grande Processing Center has policy and practice in place to provide on-going medical and mental health services to detainee victims of sexual abuse. Services are free of charge and include follow-up mental health services and treatment plans, STI testing and prophylaxis. Rio Grande Processing Center provides access to all lawful pregnancy services to female detainees who are victims of penetrative sexual abuse. All services must be at a level consistent with the community. Interviews with five medical and mental health staff confirmed no detainees received a follow-up health care after a substantiated allegation of sexual abuse.</p> <p>Rio Grande Processing Center has policy and practice in place to provide a mental health evaluation for detainees who are found to have engaged in sexual abuse. Interviews with medical and mental health staff confirmed no detainees received a mental health evaluation or were placed on a treatment plan after a substantiated allegation of sexual abuse.</p> <p>Interviews with five medical and mental staff confirmed they can provide on-going medical and mental care as needed. They stated recommendations from the hospital emergency room would be incorporated into follow-up medical care. They reported medical and mental health care is comparable with the quality of service provided in the community. They reported there were no detainees receiving on-going medical and mental health treatment after a substantiated allegation of sexual abuse.</p> <p>An interview with the PCM confirmed there were no detainees who received on-going medical and mental health care as the result of a substantiated sexual abuse allegation.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.86.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center has policy and practice in place to conduct an After-</p>

	<p>Action Review of all sexual abuse and sexual harassment allegations within 30 days of the investigation closing. The After-Action Review team is multidisciplinary; it consists of facility leadership, PCM, investigators, shift supervisors, medical and mental health staff. The After-Action Review considers all the elements outlined in the standard (d 1-5). The completed After-Action Review form is the report. If recommendations are made, they are either implemented or there is documented justification for not implementing them. After-Action Reviews are not conducted on investigations deemed unfounded.</p> <p>Interviews with two investigators indicated they were part of the after-action review team when they were responsible for conducting the investigation. They confirmed after-action review team meetings are held regularly to comply with the 30-day required timeframe. Interviews with other after-action review team members confirmed all the elements outlined in the standard (d 1-5) are reviewed and discussed. They stated they often make recommendations for policy revision. Other recommendations are documented. If the recommendation cannot be implemented, it is documented.</p> <p>Interviews with the facility head and PCM verified the after-action review process and documentation. There were thirteen after-action reviews conducted during the audit period. The facility head stated recommendations are implemented when practical; however, some recommendations require funds not budgeted for. He stated he submits a budget request annually and includes after-action review recommendations.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.87</b>	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.87.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>The GEO Group website was reviewed. PREA Annual Reports between 2017 and 2024 were posted on the public website.</p> <p>An interview with the PCM confirmed he maintains sexual abuse and sexual</p>

	<p>harassment data through a web-based data collection and management program and on a tracking log. An interview with the PREA Coordinator verified sexual abuse and sexual harassment data is collected and maintained through a companywide, proprietary system. Annually, data is collected, reviewed and aggregated to publish a detailed agency annual report. The annual report is reviewed and approved by agency leadership and posted to The GEO Group's public website. The PREA Coordinator confirmed if data is requested for the Survey of Sexual Violence, the agency and facility comply with the request and submit the requested sexual abuse and sexual harassment data.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.88.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>The GEO Group website was reviewed. PREA Annual Reports between 2017 and 2024 were posted on the public website.</p> <p>An interview with the PCM confirmed he maintains sexual abuse and sexual harassment through a web-based data collection and management program and a tracking log. An interview with the PREA Coordinator verified sexual abuse and sexual harassment data is collected and maintained through a companywide, proprietary system. Annually, data is collected, reviewed and aggregated to publish a detailed annual report. Any corrective action gleaned from the data review and aggregation is implemented through policy and practice revision. PREA training may be updated to reflect the corrective action taken. The annual report is reviewed and approved by agency leadership and posted to The GEO Group's public website. The PREA Coordinator confirmed if data is requested for the Survey of Sexual Violence, the agency and facility comply with the request and submit sexual abuse and sexual harassment data.</p> <p>Rio Grande Processing Center exceeds compliance with this standard.</p>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1406 499">A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.89.</p> <p data-bbox="256 539 1453 701">Rio Grande Processing Center submitted the facility policies “Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)” for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p data-bbox="256 741 1477 902">Rio Grande Processing Center maintains sexual abuse and sexual harassment data via an agencywide, web-based data collection and management system. Rio Grande Processing Center maintains sexual abuse and sexual harassment paperwork on-site in a secure area. Periodically, it is moved to an outside company’s secure warehouse.</p> <p data-bbox="256 976 1477 1048">The GEO Group website was reviewed. PREA Annual Reports between 2017 and 2024 were posted on the public website.</p> <p data-bbox="256 1088 1461 1205">An interview with the PCM confirmed he maintains sexual abuse and sexual harassment through a web-based data collection and management program and in a secure area on-site.</p> <p data-bbox="256 1245 1437 1451">He verified that periodically the sexual abuse and sexual harassment paperwork is moved to an off-site secure warehouse managed by a third-party. An interview with the facility head confirmed the data maintenance and storage process. Completed investigation documents are maintained for as long as the staff is employed or the detainee is in custody plus five years.</p> <p data-bbox="256 1491 1469 1731">An interview with the PREA Coordinator verified sexual abuse and sexual harassment data is collected and maintained through a companywide, proprietary system. He confirmed The GEO Group uses an outside data maintenance and storage company who has a secure warehouse. Sexual abuse and sexual harassment data is maintained according to the PREA standard (d), agency policy and state statutes. Sexual abuse and sexual harassment data is maintained for at least 10 years.</p> <p data-bbox="256 1760 1246 1794">Rio Grande Processing Center exceeds compliance with this standard.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>A review of Rio Grande Processing Center's pre-audit evidentiary documents was conducted. Information from on-site interviews as well as on-site documents provided, and observations made during the site review were considered to determine compliance with standard 115.401.</p> <p>Rio Grande Processing Center submitted the facility policies "Sexual Abuse/Assault Prevention and Intervention Program (PREA) (1300.05)" for review. It was concluded that the policy contained the required language to align with the elements of the standard.</p> <p>Rio Grande Processing Center last PREA audit report was dated 12/28/2022. The auditor was originally certified by the Department of Justice in October 2016. At the time of the on-site, the auditor's certification expired in December 2025.</p> <p>The GEO Group ensures that its facilities are PREA audited at least every three years, or once in an audit cycle. All facility PREA final reports are posted on The GEO Group's public website. A review of The GEO Group's website confirmed the final PREA reports are publicly available.</p> <p>During the audit, the auditor was provided with access to all areas of the facility and to observe cameras. I was allowed to revisit areas throughout the facility during the entire audit.</p> <p>Personnel files, detainee files, training records, investigation files, logbooks, and all other pertinent information to make a compliance determination on all prison and jail PREA standards were requested. All requested documents were provided in a timely manner. Staff on all shifts were interviewed and selected at random. A random selection of detainees was made; two detainees refused the interview. All staff and detainee interviews were conducted in private.</p> <p>PREA audit postings were provided to Rio Grande Processing Center on April 27, 2025, and verification pictures were provided on April 30, 2025. PREA audit postings were provided in English and Spanish and included the auditors contact information. No correspondence from staff or detainees was received.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The GEO Group website was reviewed and the most recent final PREA reports for all facilities were posted.</p> <p>Rio Grande Processing Center is compliant with the standard.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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 facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	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
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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 inmates (N/A if the facility does not have female inmates)?	yes
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes

	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates 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 with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in	yes

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42	yes

	U.S.C. 1997)?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b) Hiring and promotion decisions</b>		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c) Hiring and promotion decisions</b>		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d) Hiring and promotion decisions</b>		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e) Hiring and promotion decisions</b>		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit,	na

	whichever is later.)	
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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 always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	

	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	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
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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 criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with	yes

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates 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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how	yes

	to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes

	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or	yes

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	na
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
<b>115.41 (g) Screening for risk of victimization and abusiveness</b>		
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h) Screening for risk of victimization and abusiveness</b>		
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i) Screening for risk of victimization and abusiveness</b>		
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a) Use of screening information</b>		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.43 (a)</b>	<b>Protective Custody</b>	

	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b) Protective Custody</b>		
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
<b>115.43 (c) Protective Custody</b>		
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes

	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d) Protective Custody</b>		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e) Protective Custody</b>		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a) Inmate reporting</b>		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
<b>115.51 (b) Inmate reporting</b>		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	na

	and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency	na

	is exempt from this standard.)	
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na

	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	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 an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	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 inmates 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
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a	yes

	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?	
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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 inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	

	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities	yes

	responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit 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?	
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates 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 inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	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	yes

	of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	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 reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations,	yes

	including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in	na

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
<b>115.73 (c) Reporting to inmates</b>		
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d) Reporting to inmates</b>		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	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
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	

	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does	yes

	the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	

	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate 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 inmates 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.)	yes
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates 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.)	yes
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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	yes

	has been determined to be unfounded?	
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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 §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	

	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
<b>115.87 (f)</b>	<b>Data collection</b>	
	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
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	

	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.401</b>	<b>Frequency and scope of audits</b>	

<b>(b)</b>		
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	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.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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	yes

	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.)	
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