

PREA Facility Audit Report: Final

Name of Facility: Snake River Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/17/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Robert Palmquist	Date of Signature: 10/17/2025

AUDITOR INFORMATION	
Auditor name:	Palmquist, Robert
Email:	robobem@gmail.com
Start Date of On-Site Audit:	09/22/2025
End Date of On-Site Audit:	09/23/2025

FACILITY INFORMATION	
Facility name:	Snake River Juvenile Detention Center
Facility physical address:	650 Addison Avenue West , Floor 3, Suite 3200, Twin Falls, Idaho - 83301
Facility mailing address:	

Primary Contact

Name:	Janaan Van Zante
Email Address:	janaan.vanzante@tfco.org
Telephone Number:	(208) 736-2588

Superintendent/Director/Administrator	
Name:	Neil Nakamura
Email Address:	neil.nakamura@tfco.org
Telephone Number:	(208) 736-2588

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-Site	
Name:	Sherry Stoutin
Email Address:	sherry@ivycom.com
Telephone Number:	(208)305-3622

Facility Characteristics	
Designed facility capacity:	19
Current population of facility:	2
Average daily population for the past 12 months:	8
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

<p>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)</p>	
<p>Age range of population:</p>	<p>10yo - 17yo</p>
<p>Facility security levels/resident custody levels:</p>	<p>0</p>
<p>Number of staff currently employed at the facility who may have contact with residents:</p>	<p>16</p>
<p>Number of individual contractors who have contact with residents, currently authorized to enter the facility:</p>	<p>1</p>
<p>Number of volunteers who have contact with residents, currently authorized to enter the facility:</p>	<p>14</p>

AGENCY INFORMATION

<p>Name of agency:</p>	<p>Twin Falls County</p>
<p>Governing authority or parent agency (if applicable):</p>	
<p>Physical Address:</p>	<p>630 Addison Avenue West, Twin Falls , Idaho - 83301</p>
<p>Mailing Address:</p>	
<p>Telephone number:</p>	<p>2087364000</p>

Agency Chief Executive Officer Information:

<p>Name:</p>	
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Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Janaan VanZante	Email Address:	janaan.vanzante@tfco.org

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>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.</p> <p>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.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
43	
Number of standards not met:	
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:	2025-09-22
2. End date of the onsite portion of the audit:	2025-09-23

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:	Voices Against Violence Executive Director 302 2ND AVENUE South Twin Falls, ID 83301

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	19
15. Average daily population for the past 12 months:	8
16. Number of inmate/resident/detainee housing units:	1
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" 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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	6
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:	0
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:	3
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:	0
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:	0
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:	1
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:	0

<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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):</p>	<p>At 8:00 am, on the first day of the Audit, the Snake River Juvenile Detention Facility Count was 6. The Auditor interviewed 100% of the residents at the facility.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>14</p>
<p>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:</p>	<p>0</p>

<p>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:</p>	<p>4</p>
<p>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:</p>	<p>The Snake River Juvenile Detention Center has two shifts. 6:00 am to 6:00 pm (Day Shift), and 6:00 pm to 6:00 am (Night Shift).</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>6</p>
<p>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>At 8:00 am, on the first day of the Audit, the Snake River Juvenile Detention Facility Count was 6. The Auditor interviewed 100% of the residents at the facility.</p>
<p>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

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):	At 8:00 am, on the first day of the Audit, the Snake River Juvenile Detention Facility Count was 6. The Auditor interviewed 100% of the residents at the facility.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	3
<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>	
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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<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. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident had a physical disability.</p>
<p>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:</p>	<p>3</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident was blind or had low vision (i.e., visually impaired)</p>
<p>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:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident was Deaf or hard-of-hearing.</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident identified as lesbian, gay or bisexual during the interview process.</p>

<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident identified as transgender.</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident had reported sexual abuse in the facility.</p>

<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. No resident disclosed prior sexual victimization during risk screening.</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The Auditor interviewed 100% of the residents at the facility. The Snake River Juvenile Detention Center does not have a segregated housing isolation unit.</p>
<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>At 8:00 am, on the first day of the Audit, the Snake River Juvenile Detention Facility Count was 6. The Auditor interviewed 100% of the residents at the facility.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>58. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>7</p>
<p>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input 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>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>The Auditor interviewed all staff on each shift.</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.

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	20
63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" 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
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	The Snake River Juvenile Detention Center is a small facility. The Juvenile Detention Manager and the PREA Coordinator are responsible for several key areas concerning the PREA Standards, including Retaliation Monitoring, Incident Reviews, and Investigations. Juvenile Custody Officers and Supervisors conduct both intake screening and Risk Assessments.

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.

71. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
75. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

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).

Audit notices were posted throughout the facility. At the main entrance hallway, Front Lobby, B wing class room, B wing hallway, A wing class room and A wing. The Audit notices were posted in English and Spanish. No issues were noted. The Audit notices were posted six weeks in advance of the Audit and the facility provided date and time stamp photos of each Audit notice. Posters providing information about outside emotional support services are present in the following locations, the main entrance hallway, Front Lobby, B wing class room, B wing hallway, A wing class room and A wing. The Zero Tolerance posters included specific information about outside emotional services in English and Spanish. No issues were noted. Each poster indicates the following information: The Snake River Juvenile Detention Center has partnered with Voices Against Violence to provide survivors of sexual abuse with emotional support services. To access these services, contact 1-208-733-0100 or send a letter to: 212 2nd Ave W#101, Twin Falls, Idaho 83301. Se Habla Espanol. Information is also provided concerning ways to report: A toll free number is provided for the National Child abuse Hotline at 1-800 422 4453, Residents can report to any staff member, volunteer, contractor, medical or mental health. Residents can submit a grievance or a sick call slip. Residents can report to the PREA Coordinator or Detention manager, Tell a family member, friend, legal counsel, or anyone outside the facility. Those individuals can report an incident by calling 1-208-736-2588. (Detention Manger direct line) Resident are also informed that they can submit a report on behalf of another resident. Resident are provided with a End the Silence pamphlet, that contains information on how to report and the avenues to report incidents of abuse or harassment, they are provided with a booklet that explains how to make an anonymous report. The booklet specifically states that the resident need only tell a staff

member that they want to make an anonymous report and the staff member is not allowed to ask them why or who they are trying to contact. The resident is provided access to a private room with instructions on how to use the phone to contact Voices against Violence, the National Child Abuse Hotline or the National Sexual Assault Hotline. The Auditor tested each speed dial phone number each worked and the auditor was able to speak with individuals from the organization listed above. There were no issues encountered during the tests, the phone instructions are easy to follow. Supervisors were consistently present and actively overseeing operations during the onsite visit, monitoring units and conducting regular rounds. The Auditor found no evidence of understaffing, overcrowding, or inadequate lines of sight. At the commencement of the Audit, the facility's population was recorded at five. During the visit, the Auditor verified that staffing levels met the PREA-required ratios for resident supervision. The PREA Coordinator confirmed that the State of Idaho mandates a 1:8 staff-to-resident ratio during waking hours, with annual inspections conducted to ensure ongoing compliance.

There were no concerns noted regarding cross-gender announcements, placement of mirrors, cameras, or electronic monitoring. The Auditor verified all camera views from the Control Center. It was noted that both female and male staff members announced their presence at each shift change and whenever residents transitioned between areas of the facility. On average, such announcements occurred six times during the day shift and four times during the night shift. Observation Cells are equipped with cameras, which are monitored directly by staff. Importantly, the toileting areas within these cells are obscured in the camera feed using designated software, ensuring privacy. The Snake River Juvenile Detention Center has

implemented comprehensive measures to guarantee that residents shower, perform personal hygiene, and change clothing outside the view of staff.

During the tour, the Auditor questioned line staff regarding their announcement protocols. All staff interviewed affirmed that they made the required announcements and notified each resident during their 12-hour shifts of the presence of both male and female staff within the building. Cross-gender supervision is conducted so as to meet facility objectives while maximizing resident privacy. Resident rooms and shower facilities observed during the tour were not equipped with cameras.

Residents may use coverings over their windows to ensure privacy when changing clothes or using the toilet. Shower areas also provide adequate privacy for residents during undress. The Auditor confirmed through observation that camera views in Observation Cells exclude the toilet area, allowing for private use. Interviews with randomly selected staff and residents indicated that residents are able to change clothing, shower, and use the toilet without being viewed by staff of another gender. Staff and residents further reported that staff gender announcements are made consistently each shift and during meal periods.

Residents are permitted to send and receive mail. Privileged mail refers to correspondence between residents and their attorney or public defender, as well as any judge or government official. Incoming privileged mail is delivered promptly. Residents are required to open privileged mail in the presence of staff, who inspect for and remove any contraband items (such as staples or paperclips). When sending privileged mail, residents must seal the envelope while staff are present; staff will verify that the resident's name appears in the top left corner and that the envelope is properly addressed.

Non-privileged mail includes written communication between residents and their family or friends. All such mail must be sent

via the United States Postal Service and may be subject to inspection by staff. Non-privileged mail is distributed during book exchange or letter writing sessions on the evening shift, provided no restrictions are in effect. Staff will open non-privileged mail in the presence of the resident, examine its contents for contraband, and retain the envelope. Outgoing non-privileged mail must be submitted to staff in an unsealed envelope for inspection; once authorized, staff will seal the envelope in the resident's presence. Restrictions on mail may be imposed by a judge, probation officer, detention manager, parent or guardian, the Department of Health and Welfare, or the Department of Juvenile Corrections.

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.

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?

- Yes
- No

78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

The Auditor reviewed the relevant policies, procedures, reports, and accreditations. The Auditor was provided a sampling of relevant documents for the most recent one-year period. The Auditor was permitted access to and observed all the Juvenile Detention Center areas. The Auditor was permitted to request and receive copies of all relevant documents. The Auditor interviewed Staff, supervisors, and administrators. The Auditor was permitted to conduct private interviews with residents. Residents were allowed to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.

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:

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

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

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

1

<p>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>1</p>
<p>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There were two administrative investigations conducted in the previous 12 months. One staff on inmate sexual abuse, unfounded. One staff on inmate sexual harassment, unfounded.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
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.	<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

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

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. 115.311 Policy 3.2 Prohibited Contact Prison Rape Elimination Act 2. 115.311 SOP Prevention Detection Response 3. 115.311 PREA Coordinator Position Description 4. 115.311 Organizational Chart Snake River <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>115.311 (a) - The Snake River Juvenile Detention Center (SRJDC) Policy 3.2 Prohibited Contact Prison Rape Elimination Act, and SOP Prevention Detection Response, indicates, sexual abuse, sexual harassment, or sexual activity of any kind will not be tolerated. These behaviors, criminal or otherwise, seriously reduce the</p>

ability of this facility to accomplish the mission of providing a safe and secure environment for residents. In accordance with the Prison Rape Elimination Act of 2003, the Snake River Juvenile Detention Center has established a zero-tolerance standard for all forms of sexual abuse and sexual harassment.

The Snake River Juvenile Detention Center has a zero-tolerance policy and training program that meets the requirements for this standard. Policy 3.2 Prohibited Contact Prison Rape Elimination Act and SOP Prevention Detection Response provides the Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. It has definitions of prohibited behaviors and sanctions for those prohibited behaviors. The policy provides strategies and responses to reduce and prevent sexual abuse and includes procedural guidelines, such as screening residents upon intake, training (for both Staff and residents), reporting procedures (both Staff and residents), intervention procedures and investigative guidelines.

115.311 (b) - The Snake River Policy 3.2 Prohibited Contact Prison Rape Elimination Act, and SOP Prevention Detection Response page 2, paragraph B., indicates the Snake River Juvenile Detention Center will designate a PREA Coordinator and allow that individual sufficient time and authority to develop, implement, and oversee facility efforts to comply with the PREA standards. This individual is an upper-level member of the management team. She is responsible for the development and implementation of procedures and training to ensure effective compliance with the PREA Standards. (See Organizational Chart)

115.311 (c) - The Snake River Snake River Juvenile Detention Center is a standalone facility. Therefore, there is no PREA Compliance Manager. The Agency has a PREA Coordinator. The PREA Coordinator indicated she had sufficient time to manage and oversee the implementation of PREA standards. The Supervisors help with PREA implementation and provide input to ensure compliance.

Policy 3.2 Prohibited Contact Prison Rape Elimination Act, and SOP Prevention Detection Response addresses 115.311 (a).

Policy 3.2 Prohibited Contact Prison Rape Elimination Act, SOP Prevention Detection Response, page 2, paragraph B., PREA Coordinator Position Description, and the interview with the PREA Coordinator addresses 115.311 (b).

The Snake River Juvenile Detention Center is a standalone facility. Therefore, there is no PREA Compliance Manager. The Agency has a PREA Coordinator. The PREA Coordinator indicated she had sufficient time to manage and oversee the implementation of PREA standards addresses 115.311 (c).

The Snake River Juvenile Detention Center complies with 115.311 Zero tolerance of sexual abuse and sexual harassment: PREA Coordinator.

115.312	Contracting with other entities for the confinement of residents
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents:

1. 2024 Memorandum of Understanding of the terms and conditions between Minidoka County (Mini-Cassia Juvenile Detention Center and Twin Falls County dated 9-19-2024.
2. Mini Cassia PREA Report

Interviews:

1. Contract Administrator- Detention Manager
2. PREA Coordinator

115.312 (a): A review of the Memorandum of Understanding executed between Minidoka County, State of Idaho, on behalf of the Mini-Cassia Juvenile Detention Center, and Twin Falls County, dated July 29, 2021, demonstrates that both parties have formally agreed to the adoption and enforcement of the Prison Rape Elimination Act (PREA) standards. The agreement further requires that any entity entering contractual relationships with Twin Falls County shall likewise implement and comply with PREA requirements and shall grant Twin Falls County administrative personnel reasonable access and authority to oversee and monitor the contracting agency's PREA compliance. The most recent PREA audit of the Mini-Cassia Juvenile Detention Center, conducted on March 24, 2023, concluded with a finding of full compliance with PREA standards.

115.312 (b): The Detention Manager, in coordination with the PREA Coordinator, has attested that the facility maintains contractual relationships with external entities for the confinement of residents, and that all such contracts contain explicit language mandating adherence to PREA standards. The Detention Manager is charged with the responsibility of conducting annual reviews to verify that all contracted entities remain in compliance with PREA requirements. Furthermore, all new or renewed contractual agreements are required to include provisions for ongoing monitoring by agency representatives to ensure continuous compliance with PREA standards.

2024 Memorandum of Understanding of the terms and conditions between Minidoka County (Mini-Cassia Juvenile Detention Center and Twin Falls County dated 9-19-2024 addresses 115.312 (a).

2024 Memorandum of Understanding of the terms and conditions between Minidoka County (Mini-Cassia Juvenile Detention Center and Twin Falls County dated 9-19-2024 and interview with the Contract Administrator, addresses 115.312 (b).

The Snake River Juvenile Detention Center complies with 115. 312 Contracting with other entities for the confinement of residents.

115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 3.2 Prohibited Contact Prison Rape Elimination Act 2. SOP Prevention Detection Response 3. Policy 12.1 Staffing Patterns Monitoring 4. SOP Staffing Plan 5. Staffing Plan Reviews 2024-2025 6. Out of Compliance Memorandum 7. Unannounced Log 2024-2025 8. ID Title 20, Chapter 5 Juvenile Corrections Act 9. IDAPA 05.01.02 10. 2025 IDJC Inspection Report June 2025 <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Detention Manager 3. Staff who conduct Unannounced Rounds <p>115.313 (a): The staffing plan implemented by the Snake River Juvenile Detention Center is developed in accordance with generally accepted practices for juvenile detention and correctional or secure residential facilities. The plan considers the following factors: (1) any judicial findings of inadequacy, of which none existed at the time of the plan’s formulation; (2) any findings of inadequacy from Federal investigative entities, with none identified at the time of development; (3) any findings of inadequacy from internal or external oversight authorities, of which none were present at the time of the plan’s creation; (4) all aspects of the facility’s physical infrastructure, including any “blind spots” or locations where staff or residents may be isolated; (5) the demographic composition of the resident population; (6) the quantity and strategic placement of supervisory personnel; (7) institutional programming scheduled during specific shifts; (8) all pertinent State or local statutes, regulations, or standards, specifically referencing the Idaho Administrative Procedures Act section 05.01.02 and Idaho Code Title 20, Chapter 5, Juvenile Corrections Act; (9) the frequency of both substantiated and unsubstantiated incidents of sexual abuse; and (10) any additional relevant considerations. In compliance with these requirements, the facility maintains a minimum staffing ratio of one staff member for every eight youth during waking hours and one staff member for every sixteen youth during sleeping hours, as mandated by Idaho law and as documented in the 2025 IDJC Inspection Report (June 2025).</p>

115.313 (b): The Snake River Juvenile Detention Center demonstrates adherence to the established staffing plan, as evidenced by facility operating procedures mandating that supervisory personnel maintain a minimum staff-to-resident ratio of one staff member per eight residents during designated waking hours (7:00 AM to 11:00 PM) and one staff member per sixteen residents during designated sleeping hours (11:00 PM to 7:00 AM). It is required that a supervisor always be present within the facility. Additionally, the staffing protocol stipulates that a staff member of the same sex as the resident population shall be assigned to each shift. This staff member is tasked with oversight of resident supervision activities involving physical contact (e.g., pat searches) and those activities necessitating reasonable safeguards against observation or supervision by staff of the opposite sex (e.g., use of toilet or shower facilities). Residents are subject to uninterrupted visual and auditory monitoring. Staff are obliged to conduct resident wellness checks at intervals not exceeding fifteen minutes. Furthermore, staff are directed to observe for indicators of resident psychological distress, including but not limited to symptoms of depression, familial rejection, isolation, or resistance to staff directives or programming. Upon identification of such indicators, staff must initiate appropriate interventions, which may include referral to Mental Health or Medical personnel.

115.313 (c): During the onsite assessment, the Auditor verified that staff-to-resident supervision levels were consistent with the staffing ratios mandated by PREA requirements. The PREA Coordinator confirmed that, pursuant to State of Idaho regulations, a minimum staffing ratio of one staff member for every eight residents is required during designated waking hours. The facility is subject to annual inspections to ensure ongoing compliance with these statutory requirements (2025 SRDJC Inspection).

115.313 (d): Policy 3.2 Prohibited Contact Prison Rape Elimination Act Page 7, paragraph 5., indicates, Video monitoring systems shall be deployed by facility personnel to augment direct staff supervision and to facilitate the prevention, detection, and response to incidents of sexual abuse. The Detention Manager, in coordination with the designated PREA Coordinator, is required to conduct a comprehensive review of all monitoring systems at a minimum on an annual basis. During this review, both parties shall assess the adequacy of current staffing levels and technological resources, identify any safety deficiencies, and, if deficiencies are discovered, formulate and implement an appropriate corrective action plan, which may include the procurement of additional technology or adjustment of staffing patterns to remedy identified concerns.

The SOP Prevention Detection Response, Page 4, paragraph D.1. indicates, a supervisor is required to conduct unannounced rounds to prevent staff sexual abuse and sexual harassment. After completing each round, the supervisor must record the details in the log. Supervisors and staff are not permitted to notify other staff members about these supervisory rounds unless such notifications are necessary for the legitimate operational needs of the facility.

The SOP Prevention Detection Response, Page 2, paragraph B.3. indicates, monthly,

the PREA Coordinator is required to conduct an unannounced, with the objective of deterring staff sexual abuse and sexual harassment. Upon completion of each round, the PREA Coordinator shall record the details of the round in the designated log. These rounds must be conducted during both night and day shifts. Supervisors and staff members are strictly prohibited from notifying other personnel of the occurrence of these supervisory rounds, except in instances where such notification is necessitated by legitimate operational requirements of the facility.

The Auditor examined the log that tracks unannounced rounds. The log included daily entries for both day and night shifts, and each shift showed that a supervisor had completed rounds aimed at detecting and preventing sexual abuse or harassment. During an interview, a shift supervisor confirmed that he personally conducted unannounced rounds at random times, and staff did not know these rounds were being done to monitor for sexual abuse or harassment. The Snake River Juvenile Detention Center consistently has intermediate-level supervisors perform and record unannounced rounds to help prevent staff sexual abuse and harassment. The procedures for these rounds are clearly defined and followed throughout the facility.

Staffing levels were appropriate throughout the facility, and video monitoring was in place to help protect residents from sexual abuse. The staffing plan is reviewed jointly by the PREA Coordinator and the Detention Manager. If there is any deviation from the staffing plan, it is documented by the facility. Over the past year, there was one instance where the facility did not meet the 1:8 staff-to-resident ratio during waking hours, and no deviations from the 1:16 ratio during sleeping hours. When reviewing the staffing plan, the facility considers issues like building layout, video monitoring coverage, resident population and behavior, supervisor availability, and any incidents of sexual abuse or harassment from the past year. Interviews with both the Detention Manager and the PREA Coordinator confirmed that they both participated in reviewing the staffing plan.

Policy 12.1 Staffing Patterns Monitoring, (All), SOP Staffing Plan, ID Title 20, Chapter 5 Juvenile Corrections Act, IDAPA 05.01.02, 2025 SRJDC Inspection Report 2025, Staffing Plan Reviews 2024-2025, and interviews with Detention Manager and PREA Coordinator addresses 115.313(a).

Policy 12.1 Staffing Patterns Monitoring, (All), SOP Staffing Plan, Staffing Plan Reviews 2024-2025, Out of Compliance Memorandum, and the interview with the Detention Manager addresses 115.313 (b).

Policy 12.1 Staffing Patterns Monitoring, (All), SOP Staffing Plan, ID Title 20, Chapter 5 Juvenile Corrections Act, IDAPA 05.01.02, Staffing Plan Reviews 2024-2025 and the interview with the Detention Manager addresses 115.313 (c).

Policy 12.1 Staffing Patterns Monitoring, (All), SOP Staffing Plan, Staffing Plan Reviews 2024-2025, and the interview with the PREA Coordinator, address 115.313 (d).

Policy 3.2, Prohibited Contact and PREA, (All), SOP Prevention Detection Response,

	<p>Page 2, paragraph B.3., Page 4, paragraph D.1, Unannounced Log 2024-2025, interviews with PREA Coordinator, Detention Manager and Staff who conduct Unannounced Rounds addresses 115.313 (e).</p> <p>The Snake River Juvenile Detention Center complies with 115.313 Supervision and monitoring.</p>
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115.315	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 3.2 Prohibited Contact PREA 2. Guidance on Cross Gender and Transgender Pat Searches Video 3. New Staff Training outline and Certificates 4. PREA Training 2024 Samples 5. PREA Training 2025 Samples 6. Policy 8.6 Juvenile Rights and Responsibilities 7. Policy 9.2 Searches 8. PREA 2023 PowerPoint 9. PREA Training 2023 Rosters and Outline 10. SOP Juvenile Pat down Searches. 11. SOP Prevention Detection Response <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Staff 2. Random residents <p>115.315 (a): The Snake River Juvenile Detention Center does not perform cross-gender strip searches. In the past three years, no cross-gender searches have been conducted. All residents are allowed to participate in all programs, and pat searches are conducted by individuals of the same sex. Policy 9.2 Searches and SOP Juvenile Pat Down Searches provides guidelines on this subject. Juveniles are informed quietly and simply about what will take place, and they should not be touched more than necessary to complete the search. Staff interviewed on this subject indicated awareness and adherence to the policy. They also demonstrated sensitivity to the potential vulnerability of residents during searches. Residents interviewed confirmed that staff of the same sex pat searches them, and random resident interviews revealed that they had never been naked in front of staff members of a different sex.</p> <p>115.315 (b): Policy 9.2, Searches and SOP Juvenile Pat Down Searches indicate that</p>

juveniles should be touched only as necessary for comprehensive searches, which must be conducted by staff of the same gender. Cross-gender pat searches not allowed. The facility confirmed no cross-gender searches occurred in the past 12 months. Staff interviews indicated cross-gender pat searches are prohibited and residents confirmed they have never been searched by opposite-gender staff.

115.315 (c) – As indicated in Policy 9.2 Searches, and SOP Juvenile Pat Down Searches, cross gender pat searches and cross gender strip or visual searches are prohibited. All pat downs are to be logged in to the Control Log noting staff, juvenile involved, location and the reason for the pat down. Staff are not allowed to conduct cross-gender pat-down searches. (SOP Juvenile Pat Down Searches, page 1, paragraph B., 9.2 Searches, page 1, 1.f.)

115.315 (d): The Snake River Juvenile Detention Center has implemented measures to ensure all residents shower, perform bodily functions, and change clothing outside the staff's view. The auditor observed staff members announcing their presence during resident movements throughout the day. The auditor questioned line staff during the tour about their announcements in the unit. Informal staff interviews indicated residents are informed that both male and female staff work in the facility during breakfast, lunch, and dinner. In addition, residents are informed that both males and females are present in the facility during movement to different areas throughout the facility. Cross-gender supervision is conducted in a manner that aligns with the facility's mission and goals while providing the highest degree of privacy possible. (Policy 8.6, Juvenile Rights and Responsibilities, page 1.3., SOP Prevention Detection Response, page 5. e. f.)

During the facility tour, the Auditor noted that resident rooms and shower rooms did not have cameras. Residents may cover their windows when changing or using the toilet in their rooms. Shower areas ensure privacy during undress. The auditor reviewed camera footage from areas where residents are housed. Observation cell cameras blacked out the toilet areas for privacy. Interviews with staff and residents confirmed that residents can change clothes, shower, and use the toilet without being viewed by opposite-sex staff. Staff also announce the gender of on-duty staff every shift and at mealtimes.

115.315 (e): Policy 9.2 Searches, page 1, 4., indicates When conducting a pat down search, the admitting staff member of the same gender will conduct the search. Additionally, 1. F. indicates, strip searches shall be performed only on entry to the facility or when there is reason to believe that weapons or contraband will be found. A staff member of the same gender as the juvenile being searched shall conduct a strip search. SOP Juvenile Pat Down Searches, page 1, B.5, states 5. cross-gender pat-down searches are prohibited by staff. Finally, SOP Prevention Detection Response, page 7, F.1.c. states: examination of transgender juveniles to confirm genital status is prohibited unless the genital status is unknown and if necessary is to be performed in private by a medical professional.

Staff are trained in techniques to conduct searches of transgender and intersex residents that is professional and respectful while still meeting security needs.

	<p>Interviews with Random Staff reflected they are prohibited from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.</p> <p>115.315 (f): The PREA Coordinator provided the training records which indicate specific training on conducting searches. The staff members viewed the video Guidance in Cross Gender and Transgender Pat Searches, (PREA Resource Center, https://www.youtube.com/watch?v=bV9a0R_f_z0). Interviews with Random Staff revealed they received training in cross-gender pat searches and searches of transgender or intersex residents.</p> <p>Policy 9.2 Searches and SOP Juvenile Pat Down Searches addresses 115.315 (a).</p> <p>Policy 9.2 Searches and SOP Juvenile Pat Down Searches, interviews with Random staff and Random residents addresses 115.315 (b).</p> <p>SOP Juvenile Pat Down Searches, page 1, paragraph B.5., and 9.2 Searches, page 1, 1.f., addresses 115.315 (c).</p> <p>Policy 8.6, Juvenile Rights and Responsibilities, page 1.3., SOP Prevention Detection Response, page 5. 3. f., interviews with Random staff and Random residents addresses 115.315 (d).</p> <p>Policy 9.2 Searches, page 1, F., and page 1. 4., SOP Juvenile Pat Down Searches, page 1, B.5. SOP Prevention Detection Response, page 7, F.1.c., and interviews with Random staff addresses 115.15(e).</p> <p>Guidance on Cross Gender and Transgender Pat Searches Video, PREA Training 2023 Rosters and Outline, New Staff Training outline and Certificates, PREA Training 2024 Samples, PREA Training 2025 and interview with Random Staff addresses 115.315(f).</p> <p>The Snake River Snake River Juvenile Detention Center complies with 115.315 Limits to cross-gender viewing and searches.</p>
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115.316	Residents with disabilities and residents who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 3.2 Prohibited Contact PREA 2. SOP Prevention Detection and Response to Sexual Abuse 3. English and Spanish Information

4. Interpreter Information PROPIO
5. PREA Brochure Samples
6. Snake River Juvenile Detention Center Site Review

Interviews:

1. Intake staff
2. Random Staff
3. Agency Head

115.316 (a): The admitting detention officer takes appropriate measures to ensure that residents with disabilities, including but not limited to those who are deaf or hard of hearing, blind or have low vision, or those with intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in all aspects of the Snake River Juvenile Detention programs, especially in efforts to prevent, detect, and respond to sexual abuse and sexual harassment. (SOP Prevention, Detection, and Response to Sexual Abuse, pages 3-4, C.6.a.-b. & h., and D. 2. a.-d.) The Snake River Juvenile Detention Center provides interpreters who can effectively and impartially interpret for residents who are deaf, hard of hearing, have limited English proficiency, or are blind or have low vision. (Interpreter Information PROPIO) The Snake River Juvenile Detention Center provides materials in formats or through methods ensuring effective, age-appropriate communication with residents with disabilities, including those with intellectual disabilities or limited reading skills.

115.316 (b): SOP Prevention, Detection, and Response to Sexual Abuse, page 3-4, C.6.a.-b. & h., and D. 2. a.-d., provides information concerning Residents with disabilities and residents who are limited English proficient. The Snake River Juvenile Detention Center provides materials in formats or through methods ensuring effective, age-appropriate communication with residents with disabilities, including those with intellectual disabilities or limited reading skills. (PREA Brochure Samples)

115.316 (c): The Snake River Juvenile Detention Center only uses resident interpreters or assistants in rare cases where a delay in finding an interpreter would risk the resident's safety. The Auditor notes that this type of event has never occurred at the facility. Interviews with Random Staff revealed they would not use a resident to interpret PREA information to another resident and would seek the services of an interpreter either through a bilingual staff member or PROPIO Interpreter services.

SOP Prevention, Detection, and Response to Sexual Abuse, pages 3-4, C.6.a.-b. & h., and D. 2. a.-d., Snake River Juvenile Detention Center Site Review, and interview with Detention Manager addresses 115.316(a).

SOP Prevention, Detection, and Response to Sexual Abuse, pages 3-4, C.6.a.-b. & h., and D. 2. a.-d., Snake River Juvenile Detention Center Site Review, PREA Brochure Samples, interviews with intake staff and random staff addresses 115.316(b).

	<p>SOP Prevention, Detection, and Response to Sexual Abuse, pages 3-4, C.6.a.-b. & h., and D. 2. a.-d., and interviews with Random Staff addresses 115.316(c).</p> <p>The Snake River Snake River Juvenile Detention Center complies with 115.316 Residents with disabilities and residents who are limited English proficient.</p>
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115.317	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Employment Application Paperwork 2. Five Year Background Check Due Dates 3. Interview Questions 4. Polygraph Report Outline 5. SOP Prevention, Detection and Response 6. SOP Standards of Conduct 7. Standards of Conduct Training 2024 8. Snake River Employee Records <p>Interviews:</p> <ol style="list-style-type: none"> 1. Administrative (Detention Manager) <p>115.317 (a): The Snake River Juvenile Detention Center policy prohibits hiring or promoting anyone who may have been previously involved in sexual abuse in a prison, jail, lockup, community confinement facility or juvenile facility. Agency policy requires consideration of sexual harassment issues during hiring. Criminal background checks are required. The entire process for hiring or promoting Staff is coordinated through the Snake River Juvenile Detention Center Detention Manager, who coordinates all activity with the Twin Falls County Human Resources Department. The Snake River Juvenile Detention Center does not hire, promote, or enlist the services of anyone who:</p> <ul style="list-style-type: none"> • a. 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). • b. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent

or refuse; or

- c. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b). (SOP Prevention, Detection and Response D.4. a-e, Employment application paperwork, Interview Questions, and Polygraph report Outline)

115.317 (b): SOP Prevention, Detection and Response D.4. a-e, indicates the agency will consider any sexual harassment incidents when hiring or contracting individuals who will interact with residents.

115.317 (c): SOP Prevention, Detection and Response D.4. a-e,, states all employees, volunteers or contractors that work in the juvenile detention facility and who will have contact with the juvenile residents of the facility, will undergo a thorough background check prior to being allowed to work with or around the residents. In addition, all employees, volunteers, or contractors have background checks with applicable child abuse registries prior to having any contact with the residents.

Thirteen employee files were reviewed; each file contained an initial background check and child abuse registry check. Administrative Staff advised they utilize the Idaho Law Enforcement Telecommunication System (ILETS) to conduct background checks on everyone who is considered for employment and anyone who has contact with residents. Further the Idaho Health and Welfare Registry is consulted on any employee or anyone who has contact with residents, including contractors and volunteers. The Snake River Juvenile Detention Center utilizes Idaho's Bureau of Criminal Identification for records checks. The Bureau of Criminal Identification is Idaho's central repository of criminal records, fingerprints, and crime statistics. The Bureau of Criminal Identification serves as the control terminal agency for the National Crime Information Center (NCIC). Administrative Staff indicated they verify prior employment, both institutional and non-institutional, as part of the pre-hire process.

115.317 (d): SOP Prevention, Detection and Response D.4. a-e,, indicates all employees, volunteers or contractors that work in the juvenile detention facility and who will have contact with the juvenile residents of the facility, will undergo a thorough background check prior to being allowed to work with or around the residents. In addition, all employees, volunteers, or contractors have background checks with applicable child abuse registries prior to having any contact with the residents. The Administrative Staff confirmed that background checks are conducted for all potential hires, contractors, and volunteers.

115.317(e): SOP Prevention, Detection and Response D.4. a-e,, indicates Snake River Juvenile Detention shall conduct background checks at least every year on current employees and contractors who may have contact with residents or have in place a system for capturing such information for current employees.

115.317 (f): SOP Prevention, Detection and Response D.4. a-e, and SOP Standards of Conduct A.1.-2., C.2., J.1.-2., indicates Snake River Juvenile Detention shall ask all

applicants and employees who may have contact with residents directly about previous misconduct described in section 115.317, in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. Employees will also be trained on the continuing affirmative duty to disclose such misconduct.

115.317 (g): Administrative staff further indicated making false statements, providing false documentation, or omitting information during the application process may result in termination. (SOP Standards of Conduct A.1.-2., C.2., J.1.-2.)

115.317 (h): The PREA Coordinator and the Agency head stated they would provide information on substantiated allegations of sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer for whom such employee has applied to work.

SOP Prevention, Detection and Response D.4. a-e, Employment application paperwork, Interview Questions, Polygraph report Outline, and the administrative staff interview addresses 115.317 (a).

SOP Prevention, Detection and Response D.4. a-e, Employment application paperwork, Interview Questions, and Polygraph report Outline and the administrative staff interview addresses 115.317 (b).

SOP Prevention, Detection and Response D.4. a-e, Employment application paperwork, Interview Questions, and Polygraph report Outline, Snake River Employee Worksheets and the administrative staff interview addresses 115.317 (c).

SOP Prevention, Detection and Response D.4. a-e, Employment application paperwork, Interview Questions, and Polygraph report Outline, Snake River Employee Worksheets and the administrative staff interview addresses 115.317 (d).

SOP Prevention, Detection and Response D.4. a-e, SOP Standards of Conduct A.1.-2., C.2., J.1.-2., Five Year Background Check Due Dates, and the administrative staff interview addresses 115.317 (e).

SOP Standards of Conduct A.1.-2., C.2., J.1.-2., SOP Prevention, Detection and Response D.4.a.-e., Standards of Conduct Training 2024, Snake River Employee Worksheets, and Administrative Staff interview addresses 115.317 (f)

SOP Standards of Conduct A.1.-2., C.2., J.1.-2., and the administrative staff interview addresses 115.317 (g).

Administrative Staff interview addresses 115.317 (h).

The Snake River Juvenile Detention Center complies with standard 115.317: Hiring and promotion decisions.

115.318	Upgrades to facilities and technologies
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	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <p>1. SOP Prevention, Detention and Response</p> <p>Interviews</p> <p>1. Agency Head 2. Detention Manager</p> <p>115.318 (a) - The facility reported no substantial expansion or modification to existing facilities since the last PREA audit.</p> <p>115.318 (b) - The facility reported at total of sixty-seven cameras located throughout the facility.</p> <p>The Snake River Juvenile Detention Center has neither acquired a new facility nor expanded or modified its existing premises. The center has implemented minor adjustments to its video system, including repairing and adding cameras where necessary. According to the PREA Coordinator, these enhancements were undertaken to better safeguard residents against sexual abuse. At present, sixty-two cameras are strategically positioned throughout the facility to minimize blind spots. The camera system retains footage for up to thirty days and is accessible to the Facility Manager, PREA Coordinator, and Supervisors. Following a comprehensive review with the Facility Director and PREA Coordinator, all cameras were confirmed to be functioning properly, ensuring adequate video surveillance coverage across the property.</p> <p>SOP Prevention, Detention and Response D.5.a-c, interviews with the Agency Head and Detention Manager address 115.318 (a).</p> <p>SOP Prevention, Detention and Response D.5.a-c, interviews with the Agency Head and Detention Manager address 115.318 (b).</p> <p>The Snake River Juvenile Detention Center complies with standard 115.318: Upgrades to facilities and technologies.</p>
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115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents

1. Policy 3.2 Prohibited Contact Prison Rape Elimination Act
2. SOP Prevention, Detection and Response
3. 19-5303 COST OF MEDICAL EXAMS
4. Idaho Sexual Assault Response Guidelines
5. Twin Falls PD Sexual Assault Investigation
6. St Luke's Cares (Children at Risk Evaluation Services)
7. Legal Correspondence MOU Voices

Interviews

1. Random Staff
2. PERA Coordinator
3. Voices Against Violence Executive Director

115.321 (a): Policy 3.2, Prohibited Contact Prison Rape Elimination Act, and the Standard Operating Procedure concerning the Prevention, Detection, and Response to Sexual Abuse, indicates the following requirements have been established pertaining to investigatory processes. Section I stipulates that administrative investigations shall ascertain whether staff conduct, including actions or omissions, played a contributory role in incidents of abuse. Such investigations must be comprehensively documented in written reports, which shall include accounts of physical and testimonial evidence, the rationale for determinations of witness credibility, and the resultant investigative conclusions. Likewise, criminal investigations must be documented thoroughly, incorporating detailed descriptions and, where feasible, reproductions of all pertinent documentary evidence.

In instances where external agencies are engaged to conduct investigations of alleged sexual abuse, it is mandated that the facility Administrator maintain continuous awareness of investigatory progress and shall provide full cooperation to external investigatory entities. The Twin Falls City Police Department is designated as the entity responsible for conducting criminal investigations within the facility.

Section G of the SOP on Prevention, Detection, and Response delineates the responsibilities of supervisors during preliminary investigations. Supervisors are required to ensure the segregation and appropriate housing arrangements for victims, suspects, and witnesses; verify the completion and documentation of first responder protocols; secure the scene and all associated evidence; and effectuate immediate notification of the Manager or Designee. Further notifications must be delivered to Twin Falls County Medical staff and the Facility Clinician. Should preliminary investigative findings indicate potential criminal behavior, referral to the appropriate law enforcement agency is required. Additionally, the investigating agency is required to notify CARES (Children at Risk Evaluation Services), and prescribed protocols are to be followed in circumstances where the victim is unable or unwilling to identify the party implicated in prohibited sexual conduct.

The Twin Falls County Prosecuting Attorney's Office, in coordination with the Twin Falls Police Department, is charged with the responsibility of ensuring adherence to

these investigative standards for all reported allegations. All reports of sexual abuse, inclusive of those submitted by third parties or anonymously, must be expeditiously forwarded to the designated authorities for criminal prosecution.

115.321 (b): The Twin Falls Police Department follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions and administrative proceedings, which occur after the criminal process is completed. The protocol is developmentally appropriate for young people and minimizes the trauma of the child victim. (Idaho Sexual Assault Response Guidelines page 32 and Twin Falls PD Sexual Assault Investigation). Criminal investigations are referred to the Twin Falls City Police Department, and the facility relies on the law enforcement agency for evidence collection that maximizes potential for obtaining useable physical evidence. Snake River Juvenile Detention Center has a coordinated response system in place to address incidents of sexual abuse, sexual harassment, sexual contact, or any type of sexual misconduct directed toward juveniles who are in the care and custody of the Snake River Juvenile Detention Center.

115.321 (c): Forensic medical examiners and victim advocates are available to respond on a continuous basis, twenty-four (24) hours per day, seven (7) days per week. Sexual Assault Forensic Nurse Examiners (SAFE) are authorized to conduct examinations at the designated facility, St. Luke's Magic Valley Medical Center. Forensic medical examinations are provided to victims and their families without financial obligation.

115.321 (d): Upon notification of a sexual assault, the designated medical facility, in coordination with the facility administration, initiates contact with the local rape crisis center, Voices Against Violence Center, to request the deployment of a victim advocate to the medical center for in-person support. Personnel from the Voices Against Violence Center have affirmed that victim advocates are equipped to deliver a comprehensive array of victim-centered services, which include, but are not limited to, support during forensic medical examinations, accompaniment during in-hospital investigatory interviews, provision of emotional support, facilitation of referrals, and assessment of aftercare service needs. Presently, the arrangement for Voices Against Violence to provide victim advocacy services to residents of the Snake River Juvenile Detention Center is governed by a verbal agreement. These services are extended to residents under conditions comparable to those offered to the public. Notably, the facility has, to date, been unable to formalize a Memorandum of Understanding with Voices Against Violence, despite concerted efforts toward this objective. The Twin Falls County Commissioners and the Twin Falls County Prosecutor's Office have determined that no legal precedent exists for entering such a Memorandum.

115.321 (e): As noted above in 115.321(d), Voices Against Violence provides victim advocacy services to residents of the Snake River Juvenile Detention Center under a verbal agreement. These services are available to residents under terms comparable to those offered to the public. Voices Against Violence offers support throughout the forensic medical examination process and investigatory interviews,

as well as emotional support, crisis intervention information, and referrals upon request. The Auditor conducted an interview with the Executive Director of Voices Against Violence, who confirmed that victims of sexual assault are assigned an advocate for intervention and related assistance. The Advocate further stated that the organization supports victims during forensic examinations and investigatory interviews.

115.321 (f): The Twin Falls Police Department follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions and administrative proceedings, which occur after the criminal process is completed. The protocol is developmentally appropriate for young people and minimizes the trauma to the child victim. (Idaho Sexual Assault Response Guidelines, and Twin Falls PD Sexual Assault Investigation)

115.321 (h): Voices Against Violence advocates are trained in Crisis Intervention which provides comprehensive skills for assisting individuals in crisis. All volunteers and interns are trained to be equipped to help individuals in sexual assault situations. Voices Against Violence ensures all victim advocates are screened for appropriateness to be advocates and have received education concerning advocacy in situations involving sexual assaults and forensic examinations. The Snake River Juvenile Detention Center does not provide an agency staff member or a community-based staff member to provide advocacy services. Advocacy services are provided through Voice Against Violence.

The number of forensic medical exams conducted and performed by a SANEs/SAFE examiner during the past 12 months reported were zero (0).

The number of exams performed by a qualified medical practitioner during the past 12 months that occurred at the facility as reported was zero (0).

Policy 3.2 Prohibited Contact Prison Rape Elimination Act, SOP Prevention, Detection and Response, I., Idaho Sexual Assault Response Guidelines, Twin Falls PD Sexual Assault Investigation, and interviews with Random Staff, address 115.321(a).

SOP Prevention, Detection and Response, E.1. a-c, H.1. 4, Idaho Sexual Assault Response Guidelines, Twin Falls PD Sexual Assault Investigation, addresses 115.321(b).

SOP Prevention, Detection and Response, G.4. a-g, H.1. 4, Idaho Sexual Assault Response Guidelines, Twin Falls PD Sexual Assault Investigation, 19-5303 Cost of Medical Exams, and St Luke's Cares (Children at Risk Evaluation Services), addresses 115.321(c).

Legal Correspondence MOU Voices, interviews with PREA Coordinator and Voices Against Violence Advocate addresses 115.321(d).

Legal Correspondence MOU Voices, interviews with PREA Coordinator and Voices Against Violence Advocate addresses 115.321(e).

SOP Prevention, Detection and Response, I.1.j, Idaho Sexual Assault Response

	<p>Guidelines, and Twin Falls PD Sexual Assault Investigation, address 115.321(f).</p> <p>Legal Correspondence MOU Voices and interview with Voices Against Violence Executive Director addresses 115.321(h).</p> <p>The Snake River Juvenile Detention Center complies with standard 115.321: Evidence protocol and forensic medical examinations.</p>
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115.322	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection and Response 2. Idaho Sexual Assault Response Guidelines 3. Twin Falls PD Sexual Assault Investigation 4. 4-13-24 PREA Report 5. 6-4-25 PREA Report 6. SRJDC Website Information <p>Interviews</p> <ol style="list-style-type: none"> 1. Agency Head 2. Investigator <p>115.322 (a): The Snake River Juvenile Detention Center supervisors ensure that an administrative or criminal investigation is completed for all sexual abuse and sexual harassment allegations. The Investigator coordinates administrative and criminal investigations of alleged incidents of sexual misconduct in cooperation with local law enforcement as needed. (SOP Prevention, Detection and Response, I.1. a-j)</p> <p>115.322 (b): The Twin Falls Police Department has legal authority to conduct criminal investigations. The Snake River Juvenile Detention Center has a policy to ensure referrals of allegations for investigations. The facility prohibits all acts of sexual harassment, sexual misconduct, and sexual abuse. All allegations involving sexual harassment or sexual abuse will be investigated. Allegations, other than those which fall under criminal code, will be administratively fully investigated. (SOP Prevention, Detection and Response, I.1. a-j)</p> <p>115.322 (c) - As indicated in 115.322 (b), describes the responsibilities of the facility and Twin Falls Police Department in relation to criminal investigations. In addition, the Idaho Sexual Assault Response Guidelines and the Twin Falls PD Sexual Assault Investigation provide details on the responsibilities of the investigation entity.</p>

	<p>The Snake River Juvenile Detention Center documents all referrals. The Auditor interviewed the Investigator for the Detention Center. During the interview, the Investigator indicated she would coordinate the release of any documentation, coordinate staff interviews and give the Twin Falls Police Department unlimited access to the facility as needed for conducting a criminal investigation.</p> <p>The Snake River Juvenile Detention Center investigator conducts administrative investigations. The Investigator participated in the Art of Interviews and Interrogations, at the Ada County Sheriff's Office and PREA: Investigation Sexual Abuse in the Confinement Setting. This training class was coordinated through the Idaho Department of Juvenile Corrections and the National PREA Resource Center. Interviews with the Detention Manager and the PREA Coordinator confirm that referrals and investigations would be completed for any sexual assault or sexual harassment incidents.</p> <p>The Snake River Juvenile Detention Center ensures both administrative and criminal investigations are completed for all allegations of sexual abuse and sexual harassment. The facility has procedures requiring investigations by the Twin Falls Police Department. The Juvenile Detention Center staff have been trained to conduct administrative investigations involving sexual abuse or harassment. If an administrative investigation potentially involves criminal behavior, the investigation is referred to the Twin Falls Police Department. The agency documents all referrals. The Snake River Juvenile Detention Center website provides information concerning PREA, and the PREA Policy is posted on the Web site https://twinfallscounty.org/juvenile/detention/.</p> <p>SOP Prevention, Detection and Response, I.1. a-j., 4-13-24 PREA Report, 6-4-25 PREA Report, and the interview with the Superintendent address 115.322(a).</p> <p>SOP Prevention, Detection and Response, I.1. a-j., and the interview with the Investigative Staff address 115.322(b).</p> <p>SOP Prevention, Detection and Response, I.1. a-j., the Idaho Sexual Assault Response Guidelines and the Twin Falls PD Sexual Assault Investigation and the agency web site https://twinfallscounty.org/juvenile/detention, addresses 115.322 (c).</p> <p>The Snake River Juvenile Detention Center complies with standard 115.322: Policies to ensure referrals of allegations for investigations.</p>
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115.331	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents

1. 2023 Staff PREA Training Record
2. PREA Training 2024 Samples
3. PREA Training 2025 Samples
4. PREA PowerPoint
5. PREA Training Objectives
6. SOP Child Protection Notification
7. SOP Prevention Detection and Response
8. SOP Standards of Conduct
9. Stand of Conduct Acknowledgement
10. Snake River Employee Records

Interviews

1. Random Staff interviews

115.331 (a): SOP Prevention Detection and Response, C., specifies the PREA Training requirements. New Employee Orientation is to include the National Institute of Corrections on-line PREA Course titled, "Your Role: Responding to Sexual Abuse" and successfully complete the course test by receiving an 80% or above prior to continuing in the facility orientation process. All existing staff members will complete the National Institute of Corrections on-line PREA course titled, "Your Role: Responding to Sexual Abuse" on a biennial basis as scheduled. In addition, all employees will review and receive training on the agency's sexual abuse and sexual harassment policy annually. The Snake River Juvenile Detention Center trains all employees who may have contact with residents on: the zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities pursuant to the PREA Standards; residents' right to be free from sexual abuse and sexual harassment; the right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment; the common reactions of victims of sexual abuse and sexual harassment; how to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents; how to avoid inappropriate relationships with residents; how to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender non-conforming residents; and laws related to mandatory reporting of sexual abuse and the age of consent. The training covers both male and female residents.

115.331 (b): The facility houses both male and female residents. The facility provides Cross-Gender and Transgender Pat Search Training including a video on the subject. Training is tailored to the unique needs and attributes of residents. Employees are well versed in the Detention Center's current sexual abuse and sexual harassment policies, standard operating procedures, and Cross-Gender/ Transgender Pat Search procedures.

115.331(c): All current employees are trained and participate in PREA refresher training on a yearly basis.

	<p>115.331 (d): The Snake River Juvenile Detention Center documents that employees understand their training. The Auditor reviewed employee training records, and the PREA Coordinator provided copies of training records for the employees. The training records indicate that PREA Training is provided annually.</p> <p>Seven random staff interviews were conducted. The staff members interviewed by the Auditor indicated a clear understanding of the Prison Rape Elimination Act. The random Staff interviewed were able to recall information from the training, such as the zero tolerance for sexual assault and sexual harassment, professional and gender-specific pat search procedures, how to respond to sexual assaults and the first responder's duties. Staff members recalled how to avoid inappropriate relationships with residents, the dynamics of sexual abuse in prison, and how to detect signs of sexual abuse. All employees have been trained, and the Auditor confirmed the training records of the employees. All Staff interviewed confirmed their participation in PREA training and knowledge of the training curriculum.</p> <p>SOP Prevention Detection and Response, C., 2023 Staff PREA Training Record, PREA Training 2024 Samples, PREA Training 2025 Samples, SOP Standards of Conduct, Stand of Conduct Acknowledgement, Snake River Employee Records, and interviews with Random staff addresses 115.331 (a).</p> <p>PREA PowerPoint, and interviews with Random staff addresses 115.331 (b).</p> <p>2023 Staff PREA Training Record, PREA Training 2024 Samples, PREA Training 2025 Samples, SOP Standards of Conduct, Stand of Conduct Acknowledgement, Snake River Employee Records, and interviews with Random staff addresses 115.331 (c).</p> <p>2023 Staff PREA Training Record, PREA Training 2024 Samples, PREA Training 2025 Samples, SOP Standards of Conduct, Stand of Conduct Acknowledgement, and interviews with Random staff addresses 115.331 (d).</p> <p>The Snake River Juvenile Detention Center complies with standard 115.331: Employee training.</p>
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115.332	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection and Response 2. PREA Training Acknowledgment Volunteers and Contractors Blank 3. Volunteer Contractor Acknowledgements 2024 and 2025 Samples 4. Contractor Volunteer Certificates and tests samples 5. PREA Acknowledgement Volunteer Contractor Visitors samples

6. Prison Rape Elimination Act PowerPoint
7. Volunteers and Contractor PREA Training PowerPoint

Interviews:

1. Contractors

115.332 (a): SOP Prevention Detection and Response, C.3., specifies the PREA Training requirements for contractors and volunteers. Volunteers and contractors are afforded the same training as staff to ensure proper working knowledge of the PREA standards. At a minimum, Facility Orientation for parents, visitors and contractors who have supervised contact with in-custody juveniles shall read the "Zero Tolerance" brochure and sign a PREA acknowledgement form prior to entering the secure portion of the facility. All volunteers and contractors who have supervised contact with in-custody juveniles will be required to complete the on-line Snake River Juvenile Detention Center PREA course prior to entering the facility. (PREA Training Acknowledgment Volunteers and Contractors Blank, Volunteer Contractor Acknowledgements 2024 and 2025 Samples, Contractor Volunteer Certificates, and tests samples, PREA Acknowledgement samples Volunteer Contractor Visitors)

115.332 (b): Volunteers and contractors are informed of the resident's right to be free from sexual abuse and to be free from retaliation for reporting sexual abuse and harassment incidents. Additionally, all volunteers and contractors are informed of the facility's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents involving sexual abuse and sexual harassment. (Prison Rape Elimination Act PowerPoint, Volunteers and Contractor PREA Training PowerPoint)

115.332 (c): The Snake River Juvenile Detention Center maintains documentation confirming that contractors and volunteers understand their training. (PREA Training Acknowledgment Volunteers and Contractors Blank, Volunteer Contractor Acknowledgements 2024 and 2025 Samples, Contractor Volunteer Certificates, and tests samples, PREA Acknowledgement Volunteer Contractor Visitors samples)

The Auditor interviewed three Contractors, (one nurse and two teachers). Each Contractor indicated they had been trained in sexual abuse and sexual harassment prevention, detection, and response responsibilities. The Contractors stated they had participated in a contractor orientation class. The Contractors further indicated they understood the zero-tolerance policy.

Contractors and Volunteers are informed of the resident's right to be free from sexual abuse and to be free from retaliation for reporting sexual abuse and harassment incidents. The Snake River Juvenile Detention Center maintains documentation confirming that volunteers and contractors understand their training.

SOP Prevention Detection and Response, C.3., PREA Training Acknowledgment

	<p>Volunteers and Contractors Blank, Volunteer Contractor Acknowledgements 2024 and 2025 Samples, Contractor Volunteer Certificates, and tests samples, PREA Acknowledgement Volunteer Contractor Visitors samples, and interviews with Contractors, addresses 115.332 (a).</p> <p>SOP Prevention Detection and Response, C.3., Prison Rape Elimination Act PowerPoint, Volunteers and Contractor PREA Training PowerPoint, and interviews with Contractors, addresses 115.332 (b).</p> <p>SOP Prevention Detection and Response, C.3., PREA Training Acknowledgment Volunteers and Contractors Blank, Volunteer Contractor Acknowledgements 2024 and 2025 Samples, Contractor Volunteer Certificates and tests samples, PREA Acknowledgement Volunteer Contractor Visitors samples, Prison Rape Elimination Act PowerPoint, Volunteers and Contractor and interviews with Contractors, addresses 115.332 (c).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.332: Volunteer and Contractor training.</p>
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115.333	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. 2024 Youth Handbook 3. PREA and Sexual Safety Education for Residents English and Spanish videos 4. PREA Brochure English 5. PREA Brochure Spanish 6. PREA Class Education signed Samples. 7. PREA Education and Handbook Signed Samples 8. Reporting Booklet Spanish 9. Reporting Booklet English 10. Poster Samples A wing, B wing, Front Lobby and Main Hallway 11. Snake River Resident Record Worksheets 12. Snake River Site Review <p>Interviews</p> <ol style="list-style-type: none"> 1. Intake Staff 2. Random Resident interviews

115.333 (a) Residents are provided with information regarding the policy of zero tolerance towards sexual abuse and harassment, the procedures for reporting such incidents, their right to be free from sexual abuse and harassment, and their protection against retaliation for reporting these incidents. In addition, residents are informed about how the Snake River Juvenile Detention Center will respond to such incidents. Intake Staff interviews verify that residents receive the appropriate information. Interviews with residents confirm that the Detention Center Staff provide information on reporting incidents of sexual abuse. The Agency documents the receipt of this information. The Auditor reviewed fifteen resident files; each contains documentation concerning the orientation date (intake), screening date, PREA Acknowledgement date, initial education date and comprehensive education date. Five residents were interviewed, all five indicated they received PREA information during intake. (SOP Prevention Detection Response, C.6. a-i)

115.333 (b): All residents who remain at the Snake River Juvenile Detention Center for more than ten days receive comprehensive education on PREA. The facility utilizes the State of Idaho Juvenile Corrections PREA video for their comprehensive resident PREA education. This auditor viewed the PREA video, which provides definitions of sexual abuse and sexual harassment, information on zero tolerance for sexual abuse, sexual harassment, retaliation for reporting, the dynamics of sexual abuse/sexual harassment, how to report incidents of sexual abuse/sexual harassment, how to protect against sexual abuse/sexual harassment, how to preserve evidence of sexual abuse and consequences for filing a false report. The video is a comprehensive PREA education tool that is presented in a clear, age-appropriate manner. A review of fifteen resident files reflected all fifteen residents viewed the PREA video within ten days of intake. (SOP Prevention Detection Response, C.6. a-i., PREA and Sexual Safety Education for Residents English and Spanish, Snake River Resident Record Worksheets, PREA Class Education signed samples, PREA Education and Handbook signed samples, Snake River Site Review)

115.333 (c): Comprehensive educational sessions are conducted weekly and involve a review of PREA and a video concerning the residents' right to be free from sexual abuse, harassment and retaliation while incarcerated. Residents' participation in these educational classes is documented. All residents receive comprehensive PREA education within ten days of intake. There were no residents who had not received comprehensive PREA education. (SOP Prevention Detection Response, C.6. a-i., PREA and Sexual Safety Education for Residents English and Spanish, Snake River Resident Record Worksheets, PREA Class Education signed samples, PREA Education and Handbook signed samples, Snake River Site Review)

115.333 (d): Throughout the facility, information is posted about PREA, Zero Tolerance and how to report incidents of sexual abuse. This information is presented in both Spanish and English. This information is visible and readily available. There is information provided to the residents concerning the services of Voices Against Violence. Voices Against Violence provides 24-hour crisis line services, legal advocacy, counseling, sexual assault intervention services, prevention education, family advocacy and support for children affected by violence. (Snake River Site Review, Poster Samples A wing, B wing, Front Lobby and

Main Hallway)

The Snake River Juvenile Detention Center has procedures to provide resident education in formats accessible to all residents. Residents who are limited English proficient, deaf, visually impaired, or otherwise disabled can participate in efforts to prevent and respond to sexual abuse and harassment. The Snake River Juvenile Detention Center uses written and visual education materials and has interpreters available (through PROPIO) to communicate effectively with residents. Residents with intellectual disabilities are given extra attention during the intake process to ensure they understand the information. If necessary, a Mental Health staff member aids in this process. The admitting detention officer takes appropriate steps to ensure that residents with disabilities including, but not limited to, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspects of the Snake River Juvenile Detention programs, and especially those efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

115.333 (e): The Snake River Juvenile Detention Center maintains documentation of resident participation in comprehensive education classes. A review of fifteen resident files reflected all fifteen residents viewed the PREA video within ten days of intake. Five residents were interviewed, all five indicated they received PREA information during intake and subsequently participated in comprehensive education. (Snake River Resident Record Worksheets)

115.333 (f) - During the Site Review, this auditor observed the "Zero Tolerance" and "How To Report" posters throughout the facility, including resident housing, Front Lobby, Main Entrance, and education. How To Report posters are posted at each telephone available to residents. (Poster Samples A wing, B wing, Front Lobby and Hallway, Snake River Site Review)

SOP Prevention Detection Response, C.6. a-i., Snake River Site Review, Snake River Resident Record Worksheets, PREA Class Education signed samples, PREA Education and Handbook signed samples, interviews with Intake staff and random residents addresses 115.333(a).

SOP Prevention Detection Response, C.6. a-i., PREA and Sexual Safety Education for Residents English and Spanish, Snake River Resident Record Worksheets, PREA Class Education signed samples, PREA Education and Handbook signed samples, Snake River Site Review, interviews with Intake staff and random residents addresses 115.333(b).

SOP Prevention Detection Response, C.6. a-i., PREA and Sexual Safety Education for Residents English and Spanish, Snake River Resident Record Worksheets, PREA Class Education signed samples, PREA Education and Handbook signed samples, Snake River Site Review, interviews with Intake staff and random residents addresses 115.333(c).

Snake River Site Review, Poster Samples A wing, B wing, Front Lobby and Main

	<p>Hallway, 2024 Youth Handbook, Snake River Site Review, and Snake River Resident Record Worksheets, addresses 115.333(d).</p> <p>SOP Prevention Detection Response, C.6. a-i., PREA and Sexual Safety Education for Residents English and Spanish, Snake River Resident Record Worksheets, PREA Class Education signed samples, PREA Education and Handbook signed samples, Snake River Site Review, addresses 115.333(e).</p> <p>Poster Samples A wing, B wing, Front Lobby and Hallway, Snake River Site Review. 2024 Youth Handbook, PREA Brochure English, PREA Brochure Spanish, PREA Class Education signed Samples, PREA Education and Handbook Signed Samples, Reporting Booklet Spanish, and Reporting Booklet English, addresses 115.333(f).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.333: Resident education.</p>
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115.334	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. Investigator Certificates <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigator <p>115.334 (a) The Snake River Juvenile Detention Center investigative staff conduct administrative investigations involving sexual abuse and sexual harassment. The Investigator participated in the Art of Interviews and Interrogations, at the Ada County Sheriff’s Office and PREA: Investigation Sexual Abuse in the Confinement Setting. This training class was coordinated through the Idaho Department of Juvenile Corrections and the National PREA Resource Center. (SOP Prevention Detection Response, I. 1. a-j., Investigator Certificates)</p> <p>115.334(b): The curriculum Specialized Training: Investigating Sexual Abuse in Confinement Settings is designed to address the requirements outlined in PREA Standard 115.334 requiring specialized training for individuals tasked with investigating alleged incidents of sexual abuse in confinement settings. Additionally, this curriculum contains the fundamental information to understanding the concepts required by PREA Standard 115.334 and best practice in investigating incidents of sexual abuse. The training includes the proper use of Miranda and Garrity warnings,</p>

evidence collection, and the criteria and evidence required to substantiate a case for administrative action or criminal referral. The Auditor reviewed the training certificates. (Investigator Certificates)

The Investigator was aware of her responsibilities during an investigation; she indicated that the investigation would begin immediately upon notification of an allegation. Any allegation that is potentially criminal behavior would require police involvement. Her training covered all areas of the investigative process, interviewing techniques, evidence collection, evidence protection and victim advocacy. Securing and processing the scene for evidence. Securing all evidence and maintaining the integrity of the evidence. Seeing to the victim's needs and providing advocacy support. The Investigator stated she would review memorandums, collect data, and draft a report. The training reviewed good interpersonal communication skills with resident victims, assailants, and witnesses. Understanding of the dynamics of resident sexual violence. Establishing good working relationships with outside agencies, hospitals, prosecutors, and investigators.

The Investigator noted that Anonymous or third-party reports would be thoroughly investigated as soon as possible. A third party or an anonymous tip would be treated the same as a direct report. Specifically, the Investigator indicated she would begin by introducing herself to the victim, and ensuring the victim's immediate health and safety concerns had been addressed. She would then help the victim gain back a sense of control by involving them in the decision of when and where to hold the interview. and then proceed with a normal investigation process.

The Investigator indicated that if the incident were criminal in nature, she would not collect specific physical and DNA evidence, she would aid the Twin Falls Police Department by providing victim and perpetrator information such as any pertinent central file information, information concerning prior complaints and reports of prior sexual abuse and she would provide any information on prior investigations involving either the victim or the perpetrator.

115.334 (c): The Snake River Juvenile Detention Center maintains documentation for the training each investigator participated in. (Investigator Certificates)

SOP Prevention Detection Response, I. 1. a-j., the Investigator Certificates, and the interview with the investigator address 115.334 (a).

Investigator Certificates and the interview with the investigator addresses 115.334(b).

Investigator Certificates address 115.334 (c).

The Snake River Juvenile Detention Center complies with Standard 115.334: Specialized training: Investigations.

115.335	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. Mental Health PREA Training 3. PREA 201 Mental Health <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health interview 2. Medical RN interview <p>115.335 (a) SOP Prevention Detection Response, C.4.a., medical and mental health care practitioners who work regularly in the facility are trained in how to detect and assess signs of sexual abuse, how to preserve physical evidence, how to respond effectively and professionally to young victims of sexual abuse, how and to whom to report allegations or suspicions of sexual abuse and the facility's PREA policy and procedure. The mental health staff received training on identifying signs of sexual abuse and responding effectively to victims. Specialized training also included victim identification, interviewing, and interventions. The Mental Health staff member works at the facility. The Medical staff work for IVY Correctional Medicine. Twin Falls County Jail coordinates this contract. Medical staff provide clinic hours at the Juvenile Facility three days a week. Medical staff review the medical information collected by staff at intake and see residents, as necessary. Medical Staff are on call regarding staff questions and are always contacted concerning any medications.</p> <p>115.335(b): The PREA Coordinator advised they do not conduct forensic medical examinations at the facility.</p> <p>115.335(c): The facility provided training documentation for "PREA Medical and Mental Care Standards for the Mental Health Staff member.</p> <p>115.335 (d): The Snake River Juvenile Detention Center provides PREA training to the facility's mental health practitioner and medical staff. The training includes detecting signs of sexual abuse/harassment, preventing the destruction of evidence, responding to victims, and reporting allegations or suspicions of sexual abuse and sexual harassment. The Auditor confirmed that training was provided for Medical and Mental Health staff.</p> <p>SOP Prevention Detection Response, C.4.a., Mental Health PREA Training, PREA 201 Mental Health, and the interviews with Medical and Mental Health Staff addresses 115.335(a).</p> <p>Interview with Medical Staff addresses 115.335 (b).</p>

	<p>SOP Prevention Detection Response, C.4.a., Mental Health PREA Training, PREA 201 Mental Health and the interviews with Medical and Mental Health Staff addresses 115.335 (c).</p> <p>SOP Prevention Detection Response, C.4.a., Mental Health PREA Training, PREA 201 Mental Health and the interviews with Medical and Mental Health Staff addresses 115.335 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.335: Specialized training: Medical and mental health care.</p>
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115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. Alaska Screening 3. MAYSI-2 Questionnaire Paper version 4. Vulnerability assessment 5. Vulnerability Assessment samples 6. Snake River Resident Record Worksheets 7. Snake River Site Review <p>Interviews:</p> <ol style="list-style-type: none"> 1. Staff who perform risk assessments 2. PREA Coordinator 3. Random Residents <p>115.341 (a): All residents are provided with Risk Assessments upon intake. The Standard Operating Procedure provides that assessments are conducted within the first 72 hours; however, the Auditor notes that these assessments are done almost immediately after the initial intake. The assessment includes the mental, physical and developmental disability of the resident, the age of the resident, the physical build of the resident, previous incarcerations, criminal history, prior sex offenses, whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming, prior sexual victimization and the resident's perception of their vulnerability. (SOP Prevention Detention Response E.1. a-f., Alaska Screening Tool, MAYSI-2 Questionnaire Paper Version, Vulnerability assessment, Vulnerability assessment samples)</p> <p>115.341 (b): The Vulnerability Assessment, MASI II, and Alaska Screening tool assess</p>

various vulnerabilities. They consider age, prior placements in locked juvenile facilities, feelings about being in such facilities, perceived risk of attack or abuse, history of threats, harassment, or actual attacks, bullying, unwanted sexual experiences (reported or not), identification as LGBT or intersex, and arrests on sexual or violent offenses. Assessments also evaluate intellectual impairment, learning disabilities, special education needs, or developmental delays. (SOP Prevention Detention Response E.1. a-f., Alaska Screening Tool, MAYSI-2 Questionnaire Paper Version, Vulnerability assessment, Vulnerability assessment samples)

115.341 (c): Using the Vulnerability Assessment, MASI II, and Alaska screening tools, the Snake River Juvenile Detention Facility seeks to gather information on:

- Prior sexual victimization or abusiveness
- Gender nonconforming appearance or behavior, or identification as lesbian, gay, bisexual, transgender, or intersex
- Current charges and offense history
- Age
- Emotional and cognitive development
- Physical size and stature
- Mental illness or disabilities
- Intellectual or developmental disabilities
- Physical disabilities
- Resident's perception of vulnerability
- Any other specific needs for supervision, safety precautions, or separation from other residents

Staff Responsible for Risk Screening advised that they consider age, prior placements, whether the resident feels safe, have they been abused before, violence history, sexual offense history, the resident's size, and any disabilities.

115.341 (d) – Both Intake Staff and Staff Responsible for Risk Screening indicated information is obtained during the intake process, medical screening, and mental health screening. Documentation includes reviewing court records, behavioral records MASI II, and Alaska Screening Tool results.

115.341 (e) Subject to mandatory reporting laws, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as required by facility policy and Federal, State, or local law, to inform treatment plans, security and management decisions, including housing, school, and program assignments. Information gathered by Juvenile Detention Officers will be placed in the medical file for medical and mental health practitioners to enter in to discussions with juveniles for the purpose of gathering more information about their sexual orientation or gender identity, prior sexual victimization, history of engaging in sexual abuse, mental health status, and mental disabilities. Medical and Mental Health practitioners will provide written need-to-know information to be disbursed to

	<p>all staff solely for the purpose of keeping all juveniles safe and free from sexual abuse. Sensitive information is not shared unnecessarily. Residents at the Detention Center indicated they had been queried on questions concerning whether they had been victims of sexual abuse or sexual harassment or if they had been arrested or charged with a sex offense. Screening staff affirmatively ask residents about their sexual orientation and gender identity by inquiring if they identify as lesbian, gay, bisexual, transgender, or intersex (LGBTI), in addition to making a subjective determination about perceived status. The screening information is used to assist in decisions regarding a Resident’s housing unit, educational needs, and interventions. The screening process is designed to encourage Residents to disclose sensitive information about previous sexual abuse and vulnerabilities they may have, including their sexual orientation and gender identity.</p> <p>SOP Prevention Detention Response E.1. a-f., Alaska Screening Tool, MAYSI-2 Questionnaire Paper Version, Vulnerability assessment, Vulnerability assessment samples, Snake River Resident Record worksheets, interviews with Staff who perform risk assessments and random residents addresses 115.341 (a).</p> <p>SOP Prevention Detention Response E.1. a-f., Alaska Screening Tool, MAYSI-2 Questionnaire Paper Version, Vulnerability assessment, Vulnerability assessment samples, Snake River Record worksheets, address 115.341 (b).</p> <p>SOP Prevention Detention Response E.1. a-f., Alaska Screening Tool, MAYSI-2 Questionnaire Paper Version, Vulnerability assessment, Vulnerability assessment samples, Snake River Resident Record worksheets, and the interview with Staff who perform risk assessments addresses 115.341 (c).</p> <p>SOP Prevention Detention Response E.1. a-f., Vulnerability assessment samples, Snake River Resident Record worksheets, and the interview with Staff who perform risk assessments addresses 115.341 (d).</p> <p>SOP Prevention Detention Response E.1. a-f., interviews with the PREA Coordinator and Staff who perform risk assessments addresses 115.341 (e).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.341: Screening for risk of victimization and abusiveness.</p>
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115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. Policy 6.5 Use of Seclusion

3. Pat Search Preference Form
4. Special Management Phase 1-3 forms
5. Vulnerability assessment samples

Interviews

1. PREA Coordinator
2. Risk of Victimization and Abusiveness
3. Detention Manager
4. Mental Health

115.342 (a): The Snake River Juvenile Detention Center utilizes the intake information to make decisions on housing assignments. The needs of each resident are taken into consideration. Detention staff indicated they would determine housing on a case-by-case basis and have appropriate facilities available to ensure the safety of all residents.

115.342 (b): Observation cells are utilized only as a last resort when no other methods are available to ensure the safety of the residents or others. (Suicide Prevention) Residents placed in observation cells continue to participate in regular programming, including large muscle exercise and educational activities. Additionally, residents in observation cells are seen daily by mental health staff. Snake River Juvenile Detention Center does not have an isolation unit or segregation unit. If a resident is subject to seclusion pursuant to Policy 6.5 Use of Seclusion, residents are placed in the cells at the farthest end of either housing wing. (Cell 5 or 13)

115.342 (c): LGBTQI residents are not assigned housing or beds based on their orientation. All residents at Snake River Juvenile Detention Center are placed in single cells.

115.342 (d): The PREA Coordinator stated during her interview that the facility would consider a transgender or intersex resident's views concerning safety. More specifically, for youth who identify as transgender or intersex, Mental Health staff would assist in the intake process to ease any challenges perceived by the youth. Preferences concerning housing assignments for LGBTQI youth are always considered. Mental Health Staff monitor transgender or intersex residents. Any issues concerning residents who may be vulnerable due to their sexual orientation are documented so that supervisors, if necessary, can adjust assignments.

115.342 (e): Placement and programming assignment for each transgender or intersex resident would be reassessed at least twice each year. The Auditor notes that the average sentence at the Snake River Juvenile Detention Center is less than fifteen days.

115.342 (f): The PREA Coordinator stated during her interview that the facility would consider a transgender or intersex resident's views concerning safety. The PREA Coordinator advised they would house a transgender resident with consideration as

to whether the placement will ensure the residents health and safety.

115.342 (g): All residents are provided with the opportunity to shower separately from other residents.

115.342 (h) - The facility reported no residents at risk of sexual victimization who were held in isolation in the past 12 months. The Snake River Juvenile Detention Facility has all single-occupancy cells. As noted in 115.342 (b): Observation cells are utilized only as a last resort when no other methods are available to ensure the safety of the residents or others. (Suicide Prevention) Residents placed in observation cells continue to participate in regular programming, including large muscle exercise and educational activities. Additionally, residents in observation cells are seen daily by mental health staff. Snake River Juvenile Detention Center does not have an isolation unit or segregation unit. If a resident is subject to seclusion pursuant to Policy 6.5 Use of Seclusion, residents are placed in the cells at the farthest end of either housing wing. (Cell 5 or 13)

115.342 (i): The Snake River Juvenile Detention facility does not have isolation or segregation cells. Observation cells are only used as a last resort for safety. (Suicide Prevention) Residents in these cells participate in all regular programming, including exercise and education. If a resident is subject to seclusion pursuant to Policy 6.5 Use of Seclusion, residents are placed in the cells at the farthest end of either housing wing. (Cell 5 or 13) Any confinement longer than twenty-four (24) hours must be reviewed by the Detention Manager. The Detention Manager may order placement of any juvenile on special management in a security room when it is in the best interest of the juvenile and the safety and security of the facility. The Detention Manager shall review this action within seventy-two (72) hours. Special management juveniles will not be confined in a security room for more than five (5) consecutive days for any reason. The time a juvenile spends on special management status shall be proportionate to the need for safety and security, taking into consideration the juvenile's prior conduct, specific program needs, and other relevant factors. The Detention Manager shall review special management confinement daily. (Policy 6.5 Use of Seclusion, page 1. 2. a-b)

SOP Prevention Detention Response E.1. e., interviews with the PREA Coordinator and staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (a).

SOP Prevention Detention Response E.1. e., interviews with staff who conduct Risk of Victimization and Abusiveness, Detention Manager and Mental Health, addresses 115.342 (b).

SOP Prevention Detention Response E.1. e., and interview with the PREA Coordinator addresses 115.342 (c).

SOP Prevention Detention Response E.1. e., and interview with the PREA Coordinator, addresses 115.342 (d).

SOP Prevention Detention Response E.1. e., interviews with the PREA Coordinator and staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (e).

	<p>SOP Prevention Detention Response E.1. e., interviews with the PREA Coordinator and staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (f).</p> <p>Interviews with staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (g).</p> <p>SOP Prevention Detention Response E.1. e., addresses 115.342 (h).</p> <p>SOP Prevention Detention Response E.1. e., Policy 6.5 Use of Seclusion, page 1. 2. a-b, Special Management Phase 1-3 forms, addresses 115.342 (i).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.342: Use of screening information.</p>
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115.351	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. 2024 Youth Handbook 3. Poster samples A wing, B wing, Front Lobby, Main Hallway 4. PREA Brochure English 5. PREA Brochure Spanish 6. Reporting Booklet Spanish 7. Reporting Booklet 8. Snake River Site Review <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Residents 2. Random Staff 3. PREA Coordinator <p>115.351 (a): There are multiple ways for Residents to report sexual abuse and sexual harassment privately. The Resident Handbook provides specific information on reporting to outside agencies. On page 5 of the Handbook the following information is available:</p> <ul style="list-style-type: none"> • Write a note, seal it in an envelope and ask staff to give it to the facility Clinician. • Fill out a medical request or a grievance form and place it in the secure drop box in the wing day area.

- Fill out a contact request to speak with the Detention Manager.
- Request a phone call to your attorney
- Ask staff to place a phone call to one of the following services. Staff will allow you to have a private conversation with the service in the secure visiting as soon as it is available.
- Voices Against Violence 24 hour hotline 733-0100 212 2nd Ave W #101 Twin Falls, Id 83301
- The Childhelp National Abuse Hotline 24 hour hotline 1-800-422-4453

During the intake process each resident is informed of the following information:
Ways to Report

The Snake River Juvenile Detention Center has multiple ways to report sexual assault and sexual abuse anonymously. If you are unwilling to report sexual abuse or assault to a trusted staff member then you can choose one of the following options:

- Write a note, seal it in an envelope and ask staff to give it to the facility Clinician.
- Fill out a medical request or a grievance form and place it in the secure drop box in the wing day area.
- Fill out a contact request to speak with the Detention Manager or PREA Coordinator.
- Request a phone call to your attorney.
- Tell a staff member that you need to make an anonymous report.

115.351 (b): Residents can call a community victim advocate hotline and may request to remain anonymous. The phone number and address are posted throughout the facility and provided in the Youth Handbook and Brochures.

115.351 (c) - Any suspected case of child abuse/neglect or harassment is to be reported immediately, and notification made through the chain of command. All staff are required to report immediately any knowledge, suspicion, or information they receive regarding an incident of retaliation against residents, or staff who reported sexual abuse or harassment; and any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, harassment or retaliation. This includes reports made verbally, in writing, anonymously, and from third parties. All reported cases of abuse or harassment will be referred to the appropriate investigating authority. Staff shall promptly document all reports. (SOP Prevention Detection and Response, G.1.a.)

115.351 (d): The PREA Coordinator advised that the facility provides writing utensils and writing paper for residents.

115.351 (e): The PREA Coordinator advised that staff can privately report to Human Resources. Staff can report privately to all members of the Management Team, including the PREA Coordinator and directly to Human Resource Director. (SOP

	<p>Prevention Detection and Response, G.1.b.)</p> <p>Resident interviews confirm knowledge of the reporting procedures. Staff interviews confirm knowledge of reporting procedures.</p> <p>SOP Prevention Detection Response, G.1.a., 2024 Youth Handbook, page 5, Poster samples A wing, B wing, Front Lobby, Main Hallway, PREA Brochure English, PREA Brochure Spanish, Reporting Booklet Spanish, Reporting Booklet, Snake River Site Review, interviews with Random Residents and Random Staff addresses 115.351 (a).</p> <p>SOP Prevention Detection Response, G.1.a., 2024 Youth Handbook, page 5, Poster samples A wing, B wing, Front Lobby, Main Hallway, PREA Brochure English, PREA Brochure Spanish, Reporting Booklet Spanish, Reporting Booklet, Snake River Site Review, interviews with the PREA Coordinator and Random Resident addresses 115.351(b).</p> <p>SOP Prevention Detection Response, G.1.a., interviews with Random Staff and Random Residents addresses 115.351(c).</p> <p>Interview with PREA Coordinator addresses 115.351(d).</p> <p>SOP Prevention Detection and Response, G.1.b.) and interviews with Random Staff addresses 115.351(e).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.351: Resident reporting.</p>
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115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Juvenile Grievance Procedure 2. SOP Prevention Detection and Response 3. 2024 Youth Handbook 4. Juvenile Contact Request form 5. Juvenile Grievance Form 6. Snake River Site Review <p>115.352 (a) - SOP Juvenile Grievance Procedure outlines the facility's process for addressing resident grievances.</p> <p>115.352 (b) - SOP Juvenile Grievance Procedure does not establish specific time</p>

limits for residents to submit grievances alleging sexual harassment or sexual abuse. If the subject of the grievance is alleging sexual abuse, the juvenile will not use the informal resolution process to resolve the incident with staff. A juvenile may file a grievance alleging sexual abuse at any time regardless of when the incident occurred. A grievance alleging sexual abuse will not be submitted or referred to the staff member who is the subject of the grievance. (SOP Juvenile Grievance Procedure, A. b., and D. 1-2., 2024 Youth Handbook page 9)

115.352 (c): A grievance alleging sexual abuse will not be submitted or referred to the staff member who is the subject of the grievance. (SOP Juvenile Grievance Procedure, D. 3-4.)

115.352 (d): All grievances alleging sexual abuse will be reviewed with-in three working days with a final decision being made no later than ninety days of the official report. If an extension is required to complete the administrative portion of the report process the juvenile will be notified in writing of the extension. The notification will include the date by which a decision will be made. (SOP Juvenile Grievance Procedure, A. b., and D. 1-2.,)

115.351 (e): The Snake River Juvenile Detention Center permits third parties, including fellow juveniles, staff members, family members, attorneys, and outside advocates, to assist juveniles in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of the juvenile. If the juvenile declines to have third-party assistance in filing a grievance alleging sexual abuse, an incident report will be written to document the refusal. Parents or legal guardians may file a grievance or appeal, alleging sexual abuse on behalf of the juvenile, regardless if juvenile agrees with the action. (SOP Prevention, Detection and Response, G.1.)

The auditor reviewed the agency's website which provides a telephone number and email address for the Detention Manager, Assistant Detention Manager, and PREA Coordinator as well as contact information for the Twin Falls Prosecuting Attorney, Twin Falls Sheriff's Office and the National Sexual Assault Hotline enabling third parties to report concerns on behalf of facility residents.

115.351 (f): Emergency grievances will be reviewed within 48 hours and a final decision will be made in 5 days. If a juvenile feels they are subject to a substantial risk of imminent sexual abuse they may file an emergency grievance. The Detention Manager will review the grievance within 48 hours and make a final decision within 5 days. Appropriate protective measures will be implemented without unreasonable delay. (SOP Prevention, Detection and Response, G.1. and SOP Juvenile Grievance Procedure, D. 3.)

115.351 (g): Juveniles who file groundless or frivolous grievances are subject to an attitude slash as determined by the Shift Supervisor and/or the Detention Manager. Grievances filed alleging sexual abuse that are determined to be groundless or frivolous will be subject to consequences as determined by the Detention Manager. (SOP Juvenile Grievance Procedure, E.. 2024 Youth Handbook, page 9.)

	<p>SOP Juvenile Grievance Procedure, and 2024 Youth Handbook addresses 115.352(a).</p> <p>SOP Juvenile Grievance Procedure, A. b., and D. 1-2., 2024 Youth Handbook page 9, addresses 115.352(b).</p> <p>SOP Juvenile Grievance Procedure, D. 3-4., and 2024 Youth Handbook, addresses 115.352(c).</p> <p>SOP Juvenile Grievance Procedure, A. b., and D. 1-2., addresses 115.352(d).</p> <p>SOP Prevention, Detection and Response, G.1., and Snake River Site Review, addresses 115.352(e).</p> <p>SOP Prevention, Detection and Response, G.1. and SOP Juvenile Grievance Procedure, D. 3., addresses 115.352(f).</p> <p>SOP Juvenile Grievance Procedure, E., 2024 Youth Handbook, page 9., addresses 115.352(g).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.352 Exhaustion of Administrative Remedies.</p>
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115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection and Response 2. Policy 8.1 Telephone 3. 2024 Youth Handbook 4. Anonymous Reporting Pamphlet 5. Reporting Booklet 6. PREA Brochure English 7. PREA Brochure Spanish 8. Posters Samples 9. Snake River Site Review <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Residents 2. Detention Manager 3. PREA Coordinator

Section 115.353(a): The Snake River Juvenile Detention Center maintains an established professional association with Voices Against Violence, an external agency specializing in support services pertinent to sexual assault. Residents are afforded access to the agency's mailing address and telephone contact information, inclusive of a toll-free number designated for confidential communications with Voices Against Violence. Additionally, residents are provided with the toll-free number for the National Sex Abuse Hotline to facilitate further confidential outreach. It is noted for the record that the Snake River Juvenile Detention Center does not detain individuals for civil immigration matters exclusively. The Center ensures reasonable facilitation of communications between residents and external confidential support services as well as legal counsel. (SOP Prevention Detection and Response, G.1.)

115.353(b): Residents are duly informed regarding the monitoring parameters governing communications and the established protocols for the transmission of abuse reports, in strict adherence to applicable mandatory reporting statutes. The 2024 Youth Handbook expressly delineates that all Facility personnel, including Clinicians, Medical Staff, and affiliated Crisis Centers, bear an unequivocal obligation to report any and all disclosures pertaining to abuse, abandonment, or neglect. Furthermore, the Reporting Booklet affirms that all services rendered by Voices Against Violence are provided at no cost and are maintained in strict confidentiality. Residents are expressly advised of their prerogative to request the submission of an anonymous report through a designated staff member. In such instances, staff are expressly prohibited from making inquiries regarding the nature or recipient of the report. Upon such request, staff shall facilitate resident access to a secure visiting room equipped with a telephone containing pre-programmed contact numbers for various hotlines, thereby enabling residents to engage in confidential communications with external support organizations. (2024 Youth Handbook, page 5, Reporting Booklet, PREA Brochure English, PREA Brochure Spanish, Posters Samples, Policy 8.1 Telephone, Procedure 6-7.)

115.353 (c): The Snake River Juvenile Detention Center maintains an established professional association with Voices Against Violence, an external agency specializing in support services pertinent to sexual assault. Residents are afforded access to the agency's mailing address and telephone contact information, inclusive of a toll-free number designated for confidential communications with Voices Against Violence. In addition, residents are provided with the toll-free number for the National Sex Abuse Hotline to facilitate further confidential outreach. Currently, the provision of victim advocacy services by Voices Against Violence to Snake River Juvenile Detention Center residents is governed by a verbal agreement, as efforts to formalize a Memorandum of Understanding have not resulted in an executed document. This outcome is attributed to determinations by the Twin Falls County Commissioners and the Twin Falls County Prosecutor's Office that no legal precedent exists for such an agreement. Services rendered by Voices Against Violence to residents are comparable in nature and scope to those available to the public. Residents are provided with access to community-based victim advocacy services. (2024 Youth Handbook, page 5, Reporting Booklet, PREA Brochure English, PREA

	<p>Brochure Spanish, Posters Samples)</p> <p>115.353(d): Residents are encouraged to maintain regular contact with family members. Currently, only Video Visiting is authorized. Although protocols for in-person visitation have been developed, the established Video Visiting procedures remain operative and in-person visitation has not been permitted. Residents may initiate telephone calls to parents, legal guardians, foster parents, or custodians. Each resident is permitted two outgoing telephone contacts to parents or guardians within a seven (7) day period, unless the Detention Manager grants approval for increased frequency. Residents are afforded access to legal counsel through both visitation and telephonic communication. Telephone communications with legal representatives are permitted for reasonable durations and are not subject to staff monitoring. Revocation of telephone privileges with attorneys shall not be imposed as a disciplinary sanction. (Policy 8.1 Telephone) All interviewed residents report confidential access to legal counsel prior to any hearings. Furthermore, all interviewed residents affirmed that opportunities for Video visitation with family members are provided.</p> <p>SOP Prevention Detection and Response, G.1., Snake River Site Review, and interviews with Random Residents addresses 115.353 (a).</p> <p>Policy 8.1 Telephone, Procedure 6-7., 2024 Youth Handbook, page 5, Reporting Booklet, PREA Brochure English, PREA Brochure Spanish, Posters Samples, River Site Review, and interviews with Random Residents addresses 115.353 (b).</p> <p>2024 Youth Handbook, page 5, Reporting Booklet, PREA Brochure English, PREA Brochure Spanish, Posters Samples, addresses 115.353 (c).</p> <p>Policy 8.1 Telephone, interviews with Detention Manager, PREA Coordinator and Random Residents, address 115.353 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.353: Resident access to outside confidential support services.</p>
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115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. PREA Poster 3. Spanish PREA Poster 4. Reporting Booklet 5. Reporting Abuse Twin Falls County

	<p style="text-align: center;">6. Snake River Site Review</p> <p>Interviews</p> <p style="text-align: center;">1. Random Residents</p> <p>115.354 (a): The Snake River Juvenile Detention Center has implemented a process for receiving third-party reports of sexual abuse. Details regarding this reporting method are available on the Snake River website https://twinfallscounty.org/reporting-abuse-2/, ensuring public access to procedures for reporting resident sexual abuse or harassment on behalf of residents. Interviews with residents demonstrate a understanding of third-party reporting mechanisms. Most residents indicated that they could inform their attorney, family member, or probation officer, who could then notify a staff member or the Director to formally report an incident.</p> <p>The Snake River Juvenile Detention Center website meets the requirements of this standard by providing clear instructions to third parties on reporting procedures. Resident interviews further confirm their awareness of these third-party reporting options.</p> <p>SOP Prevention Detection Response, G.10., PREA Poster, Spanish PREA Poster, Reporting Booklet, Reporting Abuse Twin Falls County (website information), Snake River Site Review and interviews with random residents address 115.354 (a).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.354: Third-party reporting.</p>
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115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection Response 2. 16-1605 Idaho State Code <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Mental Health 3. Medical RN 4. PREA Coordinator 5. Random Staff

115.361 (a): The Snake River Juvenile Detention Center requires all Staff to immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment in the facility. Staff members are also required to report any retaliation against residents or Staff who have reported an incident of sexual assault or sexual harassment. Regardless of its source, The Snake River Juvenile Detention Center employees, contractors, and volunteers who receive information concerning resident-on-resident sexual misconduct at the Detention Center, or who observe an incident of resident-on-resident sexual misconduct or have reasonable cause to suspect a resident is a victim of sexual misconduct, must: Immediately report the information or incident directly to their immediate Supervisor. Should it be required due to alleged criminal behavior, the Director or PREA Coordinator will notify Law Enforcement. Supervisory Staff, Mental Health staff or Medical Staff will report any incident of suspected child abuse or neglect to Child Protective Services. (SOP Prevention Detection Response G.2.a,)

115.361 (b): All Snake River Juvenile Detention Center staff, contractors, and volunteers must report any allegation of sexual abuse as required by mandatory reporting laws (Idaho State Code 16-1605). Residents are informed of the limitations of confidentiality between residents and Staff. (SOP Prevention Detection Response, F.2.c., G.6.f., G.8.c., Idaho State Code 16-1605)

115.361 (c): Aside from reporting to the designated supervisors or officials and designated State or local service agencies, The Snake River Juvenile Detention Center prohibits Staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. (SOP Prevention Detection Response, D.1.d., E.1.f., F.2.c., G.1.a.,)

115.361 (d): Medical and Mental Health practitioners must report sexual abuse to designated Supervisors and state or local agencies. (Idaho State Code 16-1605). (SOP Prevention Detection Response, F.2.c.)

115.361 (e): The Detention Manager must promptly report any allegation of sexual abuse to the alleged victim's parents or legal guardians unless there is official documentation indicating that the parents/legal guardians should not be notified and if the alleged victim is under the guardianship of the child welfare system, report any allegation of sexual abuse to the alleged victim's caseworker instead of the parents or legal guardians. (SOP Prevention Detection Response, G.6.a.-f.)

115.361 (f): While no public complaints have been received, a procedure is in place for third-party reports to be sent to the Director. If an allegation arises, the Director informs the PREA Coordinator to initiate an investigation. (SOP Prevention Detection Response, G.1.a.l.1.a.)

SOP Prevention Detection Response G.2.a, and interviews with Random staff addresses 115.361 (a).

SOP Prevention Detection Response, F.2.c., G.6.f., G.8.c., Idaho State Code 16-1605, Idaho State Code 16-1605, and interviews with Random staff addresses 115.361 (b).

	<p>SOP Prevention Detection Response, D.1.d., E.1.f., F.2.c., G.1.a., Idaho State Code 16-1605, and interviews with Random Staff addresses 115.361 (c).</p> <p>SOP Prevention Detection Response, F.2.c., Idaho State Code 16-1605, interview with Medical and Mental Health staff addresses 115.631 (d).</p> <p>SOP Prevention Detection Response, G.6.a.-f., interviews with PREA Coordinator and Detention Manager addresses 115.361 (e).</p> <p>SOP Prevention Detection Response, G.1.a.l.1.a., and the interview with the Detention Manager, addresses 115.361 (f).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.361: Staff and Agency reporting duties.</p>
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115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. 12-2-2024 Imminent Danger <p>Interviews</p> <ol style="list-style-type: none"> 1. Agency Head 2. Detention Manager 3. Random Staff <p>115.362 (a): The Snake River Juvenile Detention Center Policy requires immediate action to protect residents from sexual abuse. Staff interviewed are aware of their reporting requirements and the steps that need to be taken to ensure the residents' safety. All Staff, volunteers and contractors who receive an initial report of sexual misconduct are required to promptly intervene on the alleged victim's behalf to ensure the victim receives prompt medical and mental health, as appropriate to their needs and the circumstances of the alleged offense. (SOP Prevention Detection Response, G.1.a., G.2.a., G.7.a.)</p> <p>Staff interviews revealed that Staff members were formally trained in and understand how to ensure residents are kept safe in the event they are at risk of imminent sexual abuse. Upon receiving information that a resident is subject to a substantial risk of imminent sexual abuse, the Detention Center staff indicated immediate action would be taken. Specifically, at a minimum, housing or</p>

	<p>programming changes would be initiated to separate or limit a threat between residents. All the random staff interviews indicated a similar answer. In his interview, the Superintendent stated that facility staff would follow a plan of action that immediately eliminates the risk. Facility staff would protect the alleged victim first, and that decisions concerning housing assignments or education assignments would be incident based.</p> <p>SOP Prevention Detection Response, G.1.a., G.2.a., G.7.a. 12-2-2024 Imminent Danger, interviews with Random Staff, Agency Head and the Detention Manager addresses 115.362 (a).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.362: Agency protection duties.</p>
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115.363	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. 6-4-2025 PREA Report <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Agency Head <p>115.363 (a): Upon receipt of an allegation indicating that a resident was sexually abused while confined at another facility, the protocol of the Snake River Juvenile Detention Center mandates notification of the administrator of the implicated facility and the pertinent law enforcement entities within a timeframe of seventy-two (72) hours. Such notifications are documented. In accordance with SOP Prevention Detection Response, G.7.a.-b., the staff member who receives the report shall immediately provide a verbal notification to the on-duty Supervisor, promptly notify the Manager, compose an Incident Report, and ensure that the report is provided to the Manager. The Detention Manager is required to transmit written notification to the Head of the external facility where the alleged incident occurred within seventy-two (72) hours, notify the designated investigative agency, and request confirmation from the head of the facility that the allegation will be subjected to investigation. In instances where the Detention Manager is the recipient of an allegation of sexual abuse from an external facility pertaining to a juvenile previously housed at this Center, the Detention Manager shall undertake all investigative actions in accordance with applicable PREA standards. (SOP Prevention</p>

	<p>Detection Response, G.7.a.-b.)</p> <p>115.363 (b): Such notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation. (SOP Prevention Detection Response, G.7.a.-b.)</p> <p>115.363 (c): Such notifications are documented. In accordance with SOP Prevention Detection Response, G.7.a.-b., the staff member who receives the report shall immediately provide a verbal notification to the on-duty Supervisor, promptly notify the Manager, compose an Incident Report, and ensure that the report is provided to the Manager. (SOP Prevention Detection Response, G.7.a.-b.)</p> <p>115.363 (d): In a case where the Detention Manager receives an allegation of sexual abuse from an outside facility regarding a previously housed juvenile, the Detention Manager will follow all investigative measures with-in PREA standards. Detention Center staff must report any suspected child abuse, neglect, or harassment immediately through the chain of command. Staff must also report information on retaliation against those who reported sexual abuse or harassment and any staff negligence that may have contributed to such incidents. Reports can be verbal, written, anonymous, or from third parties. All cases will be referred to the appropriate investigative authority. Staff must promptly document all reports. (SOP Prevention Detection Response, G.2.a., G.7.a.-b.)</p> <p>In the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility is zero.</p> <p>In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities is one.</p> <p>SOP Prevention Detection Response, G.7.a.-b., addresses 115.363 (a).</p> <p>SOP Prevention Detection Response, G.7.a.-b., addresses 115.363 (b).</p> <p>SOP Prevention Detection Response, G.7.a.-b., addresses 115.363 (c).</p> <p>SOP Prevention Detection Response, G.2.a., G.7.a.-b., interviews with the Detention Manager and Agency Head addresses 115.363 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.363: Reporting to other confinement facilities.</p>
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115.364	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents

1. SOP Prevention Detection Response
2. First Responder Card
3. PREA Coordinated Plan Checklist

Interviews

1. Random Staff

115.364 (a): The Snake River Juvenile Detention Center staff members were interviewed concerning first responder responsibilities. Staff members are aware of their responsibility in this area. The staff members interviewed indicated a need to separate the victim from the abuser, preserve and protect the crime scene, advise the victim not to take any action that would compromise the evidence, and, if possible, ensure the alleged abuser did not take any action that would compromise any evidence. In addition, staff members were aware that they needed to contact their supervisor, who would contact the Detention Manager. The Staff interviewed indicated they had received training that included the duties of a first responder.

Medical Staff and Mental Health staff members were also aware of their responsibilities as first responders and the need to notify security staff.

A first responder is required to separate the alleged victim and abuser; preserve and protect the crime scene; request the alleged victim not to destroy evidence and ensure the alleged abuser does not destroy evidence. (SOP Prevention, Detection, Response, G.3.a.-b., First Responder Card. PREA Coordinated Plan Checklist)

115.364 (b): A non-security staff responder must first request the victim not destroy evidence and then notify a detention staff member. (SOP Prevention, Detection, Response, G.3.a.)

Interviews with Staff indicate they understand the duties of a first responder.

SOP Prevention, Detection, Response, G.3.a.-b., First Responder Card. PREA Coordinated Plan Checklist, and interviews with random staff addresses 115.364 (a).

SOP Prevention, Detection, Response, G.3.a.-b., First Responder Card. PREA Coordinated Plan Checklist, and interviews with random staff addresses 115.364 (b).

The Snake River Juvenile Detention Center complies with Standard 115.364: Staff first responder duties.

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. PREA Coordinated Plan Checklist 3. First Responder Card <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Random Staff <p>115.365 (a): The Snake River Juvenile Detention Center has a written plan that includes immediate notification to the Detention Manager, the PREA Coordinator, the Twin Falls Police Department and sexual assault advocates. The Detention Manager stated during his interview that Staff are trained to follow the PREA Coordinated Plan Checklist that includes but is not limited to separating the involved individuals, contacting law enforcement, maintaining evidence integrity, contacting the PREA Coordinator, Community Partners, and assisting in transport if necessary.</p> <p>The Snake River Juvenile Detention Center’s PREA Coordinated Plan Checklist includes providing mental health and medical assistance for the alleged victim as soon as possible. Separating the alleged victim from the alleged perpetrator. Taking reasonable measures to identify, isolate, and separate witnesses. Securing the incident scene so items cannot be removed or introduced and allowing only assigned investigators to assess the scene.</p> <p>First responder training includes the following information: Separate the alleged victim and abuser, preserve and protect the crime scene until steps can be taken to collect evidence, and request that the alleged victim and abuser do not take any actions that could destroy physical evidence to include: brushing teeth, washing, urinating, defecating, drinking or eating. Isolate witnesses notify law enforcement, refer the victim for appropriate medical/mental health care. (SOP Prevention, Detection, Response, G.8.a.-c., PREA Coordinated Plan Checklist, First Responder Card)</p> <p>SOP Prevention, Detection, Response, G.8.a.-c., PREA Coordinated Plan Checklist, First Responder Card, and the interview with the Detention Manager and Random staff addresses 115.365 (a).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.365: Coordinated response</p>
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115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Interviews</p> <p>Agency Head</p> <p>115.366 (a) - The Snake River Juvenile Detention Center does not participate in Collective Bargaining. During his interview the Agency Head stated that the Snake River Juvenile Detention Center has not entered into, nor does the Snake River Juvenile Detention Center maintain, any collective bargaining agreements that would restrict our ability to remove or reassign a staff member for the purpose of an investigation. All employees are considered "at will" and, at a minimum, may be placed on administrative leave during the information gathering process. We will coordinate these actions in consultation with Twin Falls County Human Resources.</p> <p>Interview with the Agency Head addresses 115.366 (a).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.366 - Preservation of ability to protect residents from contact with abusers.</p>
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115.367	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection, Response <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Agency Head 3. Retaliation Monitor Interview <p>115.367 (a): The Snake River Juvenile Detention Center prohibits retaliation against residents and Staff who report sexual abuse or sexual harassment or cooperate with investigations. The facility leadership monitors the conduct or treatment of residents or staff who have reported sexual abuse, or that cooperated with investigations for at least 90 days following their report or cooperation. (SOP Prevention Detection, Response, G.9.a.)</p> <p>115.367 (b): Multiple protection measures are available, including removal of alleged Staff and alleged resident abusers, housing changes, and advocate support.</p>

	<p>(SOP Prevention Detection, Response, G.9.a.)</p> <p>115.367 (c): Monitoring can last for at least 90 days and includes periodic status checks. The Detention Center staff will act promptly to remedy any such retaliation. The PREA Coordinator and the Detention Manager indicated they would monitor resident disciplinary reports, housing or program change requests, negative performance reviews or reassignments of Staff to determine if monitoring were necessary. (SOP Prevention Detection, Response, G.9.a.)</p> <p>115.367 (d): Monitoring of residents included periodic status checks. (SOP Prevention Detection, Response, G.9.a.)</p> <p>115.367 (e): If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall respond appropriately to protect that individual against retaliation. (SOP Prevention Detection, Response, G.9.a.)</p> <p>SOP Prevention Detection, Response, G.9.a., and Retaliation Monitoring Form addresses 116.367 (a).</p> <p>SOP Prevention Detection, Response, G.9.a., Retaliation Monitoring Form, interviews with Designated Staff who monitor retaliation, Agency Head and the Detention Manager addresses 115.367 (b).</p> <p>SOP Prevention Detection, Response, G.9.a., Retaliation Monitoring Form, interviews with Designated Staff who monitor retaliation, and the Detention Manager addresses 115.367 (c).</p> <p>SOP Prevention Detection, Response, G.9.a., Retaliation Monitoring Form, interviews with Designated Staff who monitor retaliation, and the Detention Manager addresses 115.367 (d).</p> <p>SOP Prevention Detection, Response, G.9.a., Retaliation Monitoring Form, interview the Detention Manager and Agency Head addresses 115.367 (e).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.367: Agency protection against retaliation.</p>
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115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection Response 2. Policy 6.5 Use of Seclusion

3. Special Management Phase 1-3

Interviews

1. Detention Manager
2. Medical RN
3. Mental Health

115.368 (a): SOP Prevention Detection Response, E.e., indicates juveniles at risk of sexual victimization may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other juveniles safe and only until an alternative means of keeping all juveniles safe can be determined. Juveniles placed in isolation shall have access to all juvenile rights per policy and procedure. If a juvenile is placed in isolation an incident report will be completed showing the basis for the facility's concern for the juvenile's safety, reason as to why no alternative means of separation can be arranged and any other pertinent information. The Snake River Juvenile Detention facility does not have isolation or segregation cells. Observation cells are only used as a last resort for safety. (Suicide Prevention) Residents in these cells participate in all regular programming, including exercise and education. If a resident is subject to seclusion pursuant to Policy 6.5 Use of Seclusion, residents are placed in the cells at the farthest end of either housing wing. (Cell 5 or 13) Any confinement longer than twenty-four (24) hours must be reviewed by the Detention Manager. The Detention Manager may order placement of any juvenile on special management in a security room when it is in the best interest of the juvenile and the safety and security of the facility. The Detention Manager shall review this action within seventy-two (72) hours. Special management juveniles will not be confined in a security room for more than five (5) consecutive days for any reason. The time a juvenile spends on special management status shall be proportionate to the need for safety and security, taking into consideration the juvenile's prior conduct, specific program needs, and other relevant factors. The Detention Manager shall review special management confinement daily. (Policy 6.5 Use of Seclusion, page 1. 2. a-b)

The PREA Coordinator asserts there were no circumstances within the last 12 months wherein isolation was used to protect a resident who was alleged to have suffered sexual abuse.

SOP Prevention Detection Response, E.e., Policy 6.5 Use of Seclusion, page 1. 2. a-b, Special Management Phase 1-3, interviews with the Detention Manager, Medical RN and Mental Health Staff addresses 115.368 (a).

The Snake River Juvenile Detention Center complies with Standard 115.368: Post-allegation protective custody.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

1. Policy 3.2 PREA
2. SOP Prevention, Detection Response
3. Idaho Sexual Assault Response Guidelines
4. Twin Falls PD Sexual Assault Investigation
5. 4-13-24 PREA Report
6. 6-4-2025 PREA Report

Interviews

1. Investigator
2. Detention Manager
3. PREA Coordinator

115.371 (a): Policy 3.2 PREA, delineates the facility's procedures for conducting criminal and administrative investigations into allegations of sexual abuse and harassment. Specifically, the Snake River Juvenile Detention Center will complete an internal investigation when a complaint is reported and a subsequent external investigation when rape or sexual activity is suspected. Juvenile offenders who have allegedly been sexually assaulted must be housed away from the accused offender until the investigation is complete. SOP Prevention, Detection Response, I 1.a. and c. indicates the Snake River Juvenile Detention Center investigates all allegations of sexual abuse, including those that are third-party reports, and anonymous reports. Investigations into allegations of sexual abuse will be prompt and thorough and objective. (SOP Prevention, Detection Response, I 1.a. and c.)

115.371 (b): The Twin Falls Police Department investigates allegations of sexual abuse that occur at the Snake River Juvenile Detention Facility. All correctional agencies or facilities in Idaho shall report any potentially criminal conduct to the appropriate law enforcement agency and, if an external agency is requested for investigation, shall inform that agency of the requirement to use a uniform evidence protocol in the investigation. The investigation shall ensure the healthcare needs of the victim are met and evidence is collected in a manner to properly preserve it, through a coordinated, multi-disciplinary response that is victim-centered, trauma-informed, and that considers the impact of neurobiology of trauma on the victim. The coordinated response will allow the needs of the victim to be met, while promoting the criminal justice system response. Twin Falls Police Department provides training to sexual assault investigators. That training includes initial response to sexual assaults, victim advocacy, victim's response to trauma, interviewing sexual assault victims, medical and legal aspects of sexual assault investigations. Finally, the Snake River Juvenile Detention Center investigator received training in the Art of Interviews and Interrogations, at the Ada County

Sheriff's Office and PREA: Investigation Sexual Abuse in the Confinement Setting. (Idaho Sexual Assault Response Guidelines page 34, and Twin Falls PD Sexual Assault Investigation)

115.371 (c): The Twin Falls Police Department Investigators would gather and preserve direct and circumstantial evidence, including physical and DNA evidence and electronic monitoring data. The Investigator would interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. The PREA Coordinator and the Detention Manager would assist the Police Department by providing electronic monitoring data, coordinating interviews, and providing background information on both the suspect and the victim.

115.371 (d): If a juvenile recants on a reported allegation, the request for an investigation will not be terminated based on that fact alone. (SOP Prevention, Detection Response, I 1.b.)

115.371 (e): The Snake River Juvenile Detention Center will provide full cooperation during any investigation and will actively participate in the investigative process at the request of the primary investigative agency. The Snake River Juvenile Detention Center Investigator indicated she would not conduct compelled interviews as these interviews would be conducted by the Twin Falls Police department under the direction of the Twin Falls Prosecutor.

115.371 (f): Credibility in investigations is assessed based on the individual circumstances surrounding each alleged victim, suspect, or witness. The investigation process ensures that credibility is not determined by a person's status as a resident or staff member but rather through an objective evaluation of physical evidence, testimonial accounts, and investigative findings. (SOP Prevention, Detection Response, I 1.d.)

115.371 (g): Administrative investigations must determine if staff actions or inactions contributed to abuse and document findings in written reports, including physical evidence, credibility assessments, and investigative facts. (SOP Prevention, Detection Response, I 1.f.)

115.371 (h): Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. (SOP Prevention, Detection Response, I 1.g.)

115.371 (i): Substantiated allegations of conduct that appears to be criminal are referred for prosecution. (SOP Prevention, Detection Response, I 1.h.)

115.371 (j): The Snake River Juvenile Detention Center retains all written administrative and criminal investigative reports for as long as the alleged abuser is incarcerated or employed by the facility, plus five years, unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention. (SOP Prevention, Detection Response, I 1.i.)

115.371 (k): The investigation shall continue regardless of whether the alleged abuser or victim leaves the facility. (SOP Prevention, Detection Response, I 1.b.)

115.371 (m): The Snake River Juvenile Detention Center would cooperate with outside agencies investigating sexual abuse and stay informed about the investigation's progress. (SOP Prevention, Detection Response, I 1.j.)

Where sexual abuse is alleged, and possible criminal activity has occurred, the Snake River Juvenile Detention Center will contact the Twin Falls Police Department. The Twin Falls Police Department Investigators would gather and preserve direct and circumstantial evidence, including physical and DNA evidence and electronic monitoring data. The Investigator would interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. The PREA Coordinator and the Detention Manager would assist the Police Department by providing electronic monitoring data, coordinating interviews, and providing background information on both the suspect and the victim. The Snake River Juvenile Detention Center would not terminate an investigation solely because the source of the allegation recants the allegation. During her interview, the Investigator stated that the credibility of an alleged victim, suspect, or witness would be assessed individually and would not be determined by the person's status as a resident or Staff. The Investigator stated that she would not require a resident to submit to a polygraph examination as a condition for proceeding with the investigation. Finally, the Investigator indicated all administrative investigations: would include an effort to determine whether staff actions or failures to act contributed to the abuse; and would be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations would be documented according to the Twin Falls Police Department guidelines, and substantiated allegations of conduct that appear to be criminal would be referred for prosecution.

The PREA Coordinator reported that the number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit, is zero.

Policy 3.2 PREA, SOP Prevention, Detection Response, I 1.a. and c., and the interview with the Investigator addresses 115.371(a).

SOP Prevention, Detection Response, I 1., Idaho Sexual Assault Response Guidelines page 34, Twin Falls PD Sexual Assault Investigation, and the interview with the Investigator addresses 115.371(b).

SOP Prevention, Detection Response, I 1., Idaho Sexual Assault Response Guidelines page 34, Twin Falls PD Sexual Assault Investigation, and the interview with the Investigator addresses 115.371(c).

SOP Prevention, Detection Response, I 1.b., and the interview with the Investigator addresses 115.371(d).

	<p>The interview with the Investigator addresses 115.371(e).</p> <p>SOP Prevention, Detection Response, I 1.d., and the interview with the Investigator addresses 115.371(f).</p> <p>SOP Prevention, Detection Response, I 1.f., and the interview with the Investigator addresses 115.371(g).</p> <p>SOP Prevention, Detection Response, I 1.g., and the interview with the Investigator addresses 115.371(h).</p> <p>SOP Prevention, Detection Response, I 1.h., and the interview with the Investigator addresses 115.371(i).</p> <p>SOP Prevention, Detection Response, I 1.i., and the interview with the Investigator addresses 115.371(j).</p> <p>SOP Prevention, Detection Response, I 1.b., and the interview with the Investigator addresses 115.371(k).</p> <p>SOP Prevention, Detection Response, I 1.j., and interviews with the PREA Coordinator, Detention Manager and Investigator addresses 115.371(m).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.371: Criminal and administrative agency investigations.</p>
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115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <p style="padding-left: 40px;">1. SOP Prevention Detection Response</p> <p>Interviews</p> <p style="padding-left: 40px;">1. Investigator</p> <p>115.372 (a): SOP Prevention Detection Response, J.1., indicates following an administrative finding using a preponderance of the evidence that an in-custody resident engaged in resident-on-resident sexual abuse, a resident is subject to disciplinary sanctions.</p> <p>During the course of the audit, the Investigator assigned to the Snake River Juvenile Detention Center formally attested that the evidentiary standard employed in administrative investigations is the preponderance of the evidence. The Investigator</p>

	<p>has successfully completed specialized training in the Prison Rape Elimination Act (PREA) and furnished the Auditor with a comprehensive account of the established protocols and procedures utilized in the execution of investigations pertaining to PREA-related matters.</p> <p>SOP Prevention Detection Response, J.1., and the interview with the Investigator address 115.372 (a).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.372: Evidentiary standard for administrative investigations.</p>
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115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. 4-13-24 PREA Report Harassment 3. 6-4-2025 PREA Report <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigator 2. Detention Manager <p>115.373 (a): Residents are notified of investigation results. After investigating a resident's sexual abuse allegation, the resident will be informed whether the claim is substantiated, unsubstantiated, or unfounded. (SOP Prevention, Detection, Response I.2.a)</p> <p>115.373 (b): If the Snake River Juvenile Detention Center did not conduct the investigation, it would request information from the investigative agency to inform the resident. (SOP Prevention, Detection, Response I.2.b)</p> <p>115.373 (c): After a resident alleges sexual abuse by a staff member, the Snake River Juvenile Detention Center will inform them of whether the staff member works in their unit, the staff member's employment status, any indictments, or convictions. (SOP Prevention, Detection, Response I.2.c.d.)</p> <p>115.373 (d): After a resident alleges sexual abuse by another resident, the agency must inform the alleged victim whenever it learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. Additionally, if the alleged abuser is a resident, the resident victim must be</p>

informed of the indictment or conviction. (SOP Prevention, Detection, Response I.2.c.d.)

115.373 (e): All notifications are documented. (SOP Prevention, Detection, Response I.2.c.d.)

Following the conclusion of a criminal investigation, personnel of the Snake River Juvenile Detention Center will ensure that notification is provided to the alleged victim in accordance with the Standard Operating Procedures, and such notification shall be documented. Residents shall be apprised of the determination regarding the allegation, specifically whether the allegation is substantiated, unsubstantiated, or unfounded. In instances where the investigation is conducted by an external agency, the Detention Center shall obtain pertinent information from said agency to facilitate the provision of notification to the resident as necessary.

Subsequent to an allegation of sexual abuse involving a staff member and a resident, the Detention Center shall notify the resident if the staff member ceases employment at the facility, or upon receipt of information indicating that the staff member has been indicted or convicted of a charge pertaining to sexual abuse within the facility.

In the event of an allegation of sexual abuse between residents, the Detention Center shall notify the alleged victim whenever it is determined that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. All efforts to provide notification shall be documented in accordance with facility policy.

During the preceding twelve-month period, the facility reports that two internal investigations of resident sexual abuse were completed. This is incorrect, there was one internal investigation for sexual harassment (Voyeurism) and one internal investigation for sexual abuse (unfounded). The resident was informed the investigation was unfounded. No investigations have been conducted by an external agency.

SOP Prevention, Detection, Response I.2.a., interviews with the Detention Manager and the Investigator addresses 115.373(a).

SOP Prevention, Detection, Response I.2.b., and 6-4-2025 PREA Report, addresses 115.373(b).

SOP Prevention, Detection, Response I.2.c.d., 6-4-2025 PREA Report, and interview with the Investigator addresses 115.373(c).

SOP Prevention, Detection, Response I.2.c.d., and interview with the Investigator addresses 115.373(d).

SOP Prevention, Detection, Response I.2.c.d., 6-4-2025 PREA Report, and interviews with the Investigator addresses 115.373(e).

The Snake River Juvenile Detention Center complies with Standard 115.373: Reporting to residents.

115.376	Disciplinary sanctions for staff
	<p data-bbox="280 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 266 564 300">Auditor Discussion</p> <p data-bbox="280 344 443 378">Documents</p> <ol data-bbox="341 445 916 562" style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. Twin Falls Personnel Manual 3. 18-6110 Idaho State Code <p data-bbox="280 602 1442 759">115.376 (a): The Snake River Juvenile Detention Center staff are subject to disciplinary sanctions, including termination for violating Agency sexual abuse or sexual harassment policies. (SOP Prevention, Detection, Response, J.2.a., 18-6110 Idaho State Code)</p> <p data-bbox="280 799 1414 875">115.376 (b): Termination shall be the presumptive disciplinary sanction for Staff engaged in sexual abuse. (SOP Prevention, Detection, Response, J.2.b.)</p> <p data-bbox="280 916 1449 1155">115.376 (c): Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other Staff with similar histories. (Twin Falls Personnel Manual, Section 740, Progressive Discipline)</p> <p data-bbox="280 1196 1477 1395">115.376 (d): 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, shall be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies. (SOP Prevention, Detection, Response, J.2.c. and d.)</p> <p data-bbox="280 1435 1471 2051">Any employee of the Snake River Juvenile Detention Center found to have engaged in sexual abuse shall be subject to immediate termination of employment and shall be referred for criminal prosecution in accordance with Idaho Code 18-6110. Instances of sexual harassment perpetrated by staff shall result in disciplinary measures determined by the gravity of the violation, the employee's prior disciplinary record, and sanctions imposed in analogous situations. Progressive disciplinary action typically commences with an oral reprimand or warning; however, contingent upon the circumstances, including the occurrence of additional or distinct infractions, such action may escalate to include a written reprimand, probation, suspension with or without pay, transfer or demotion, or termination of employment with the County. In circumstances deemed appropriate, referral for criminal prosecution may also occur. Notably, a single act of misconduct may warrant the imposition of substantial disciplinary penalties, including, but not limited to, suspension or discharge, without the necessity of preceding lesser disciplinary interventions.</p>

	<p>During the preceding twelve-month period, there have been no reported instances of staff violating sexual abuse or sexual harassment policies, nor have any terminations or resignations occurred as a means to circumvent termination. Disciplinary sanctions for violations of agency policies—excluding direct engagement in sexual abuse—are administered in proportion to the nature and circumstances of the infraction and the individual’s disciplinary history. No staff members have received disciplinary sanctions for such violations within the last year.</p> <p>All disciplinary actions, including resignations tendered in lieu of termination, pertaining to violations involving sexual abuse or sexual harassment, are reported to appropriate law enforcement authorities unless the conduct is determined to be non-criminal in nature, and are also communicated to relevant licensing agencies. All employees, volunteers, and contractors are required to acknowledge that the department maintains a zero-tolerance policy regarding sexual relationships with individuals under departmental supervision, and considers such conduct a severe contravention of established standards, which will not be permitted under any circumstances.</p> <p>SOP Prevention, Detection, Response, J.2.a., 18-6110 Idaho State Code, addresses 115.376 (a).</p> <p>SOP Prevention, Detection, Response, J.2.b., addresses 115.376 (b).</p> <p>Twin Falls Personnel Manual, Section 740, Progressive Discipline, addresses 115.376 (c).</p> <p>SOP Prevention, Detection, Response, J.2.c. and d., addresses 115.376 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.376: Disciplinary sanctions for Staff.</p>
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115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. HOPE Program Terminated <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager

	<p>115.377 (a): The Snake River Juvenile Detention Center policy requires that contractors or volunteers who engage in sexual abuse or sexual harassment are reported to law enforcement and relevant licensing bodies. (SOP Prevention, Detection, Response, J.3. a and b)</p> <p>115.377 (b): Contractors or volunteers who have been found to have violated the Detention Center PREA Policies are not allowed contact with residents. (SOP Prevention, Detection, Response, J.3. a and b)</p> <p>Any contractor or volunteer who engages in sexual abuse shall be prohibited from accessing the Snake River Juvenile Detention Center. Such incidents will be reported to law enforcement agencies for potential criminal prosecution and to relevant licensing bodies. The Snake River Juvenile Detention Center will implement appropriate remedial measures when necessary, including considering whether to prohibit further contact with juveniles in cases of other violations of agency sexual abuse or sexual harassment policies by contractors or volunteers.</p> <p>Over the past 12 months, the facility has reported one instance in which volunteers violated the zero-tolerance policy of the Center. That group of volunteers were asked not to return to the facility.</p> <p>All employees, volunteers, and independent contractors are required to understand that the department strictly prohibits any sexual relationships with individuals under department supervision. Such conduct constitutes a serious violation of employee standards and will not be tolerated. Engagement in personal or sexual relationships with residents will result in immediate termination of contractual or volunteer status.</p> <p>SOP Prevention, Detection, Response, J.3. a and b., and interview with the Detention Manager, addresses 115.377 (a).</p> <p>SOP Prevention, Detection, Response, J.3. a and b., Hope Program Terminated, and interview with the Detention Manager, addresses 115.377 (b).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.377: Corrective action for contractors and volunteers.</p>
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115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. Policy 3.2 PREA

3. 2024 Youth Handbook
4. Policy 6.5 Use of Seclusion
5. SOP Behavior Management Guidelines
6. Idaho Code Title 18, Chapter 61, Section 18-6110

Interviews

1. Detention Manager

115.378 (a): Residents are subject to disciplinary sanctions following an administrative finding that the resident engaged in resident-on-resident sexual abuse or a criminal finding of resident-on-resident sexual abuse. (SOP Prevention, Detection, Response, J.1.a.-d., 2024 Youth Handbook, SOP Behavior Management Guidelines)

115.378 (b): Sanctions will be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. In the event a disciplinary sanction results in the isolation of a resident, the facility shall not deny the resident daily large-muscle exercise or access to any legally required educational programming or special education services. The Snake River Juvenile Detention Center does not have an isolation unit or segregation unit. If a resident is subject to seclusion pursuant to Policy 6.5 Use of Seclusion, residents are placed in the cells at the farthest end of either housing wing. (Cell 5 or 13) Any confinement longer than twenty-four (24) hours must be reviewed by the Detention Manager.

The Detention Manager may order placement of any juvenile on special management in a security room when it is in the best interest of the juvenile and the safety and security of the facility. The Detention Manager shall review this action within seventy-two (72) hours. Special management juveniles will not be confined in a security room for more than five (5) consecutive days for any reason.

The time a juvenile spends on special management status shall be proportionate to the need for safety and security, taking into consideration the juvenile's prior conduct, specific program needs, and other relevant factors. The Detention Manager shall review special management confinement daily. (Policy 6.5 Use of Seclusion, page 1. 2. a-b, SOP Prevention, Detection, Response, J.1.a.-d).

115.378 (c): The disciplinary process shall consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. (SOP Prevention, Detection, Response, J.1.a.-d).

115.378 (d): Following an administrative finding that an in-custody resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse a resident is subject to disciplinary sanctions that includes, if appropriate, interventions designed to address and correct underlying reasons or motivations for the abuse and whether such participation in interventions will be a condition of access to programming or other benefits. (SOP

Prevention, Detection, Response, J.1.a.-d).

115.378 (e): The facility may discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact. (SOP Prevention, Detection, Response, J.1.b.).

115.378 (f): For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (SOP Prevention, Detection, Response, O.3).

115.378 (g): The Snake River Juvenile Detention Center prohibits sexual contact by any employee with a juvenile offender as defined in Idaho Code Title 18, Chapter 61, Section 18-6110. The detention center promotes a zero tolerance toward the sexual assault of juvenile offenders. Sexual activity between residents is prohibited. (SOP Prevention, Detection, Response, J.1.b., Policy 3.2 PREA, Idaho Code Title 18, Chapter 61, Section 18-6110)

Residents could be disciplined for sexual contact with Staff if the staff member did not consent to such contact. The Snake River Juvenile Detention Center prohibits all sexual activity between residents and disciplines residents for such activity. However, if sexual activity is consensual the incident would be considered a disciplinary issue and not a PREA sexual abuse violation. The Snake River Juvenile Detention Center prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence enough to substantiate the allegation. The Agency prohibits all sexual activity between residents and disciplines residents for such activity; the Agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

There have been no reported sexual abuse or harassment among Detention Center residents in the past 12 months.

SOP Prevention, Detection, Response, J.1.a.-d., 2024 Youth Handbook, SOP Behavior Management Guidelines, Policy 6.5 Use of Seclusion (all), addresses 115.378 (a).

SOP Prevention, Detection, Response, J.1.a.-d., Policy 6.5 Use of Seclusion (all), SOP Behavior Management Guidelines, and the interview with the Detention Manager, addresses 115.378 (b).

SOP Prevention, Detection, Response, J.1.a.-d., SOP Behavior Management Guidelines, and the interview with the Detention Manager, addresses 115.378 (c).

SOP Prevention, Detection, Response, J.1.a.-d., addresses 15.378 (d).

SOP Prevention, Detection, Response, J.1.b., addresses 115.378 (e).

SOP Prevention, Detection, Response, O.3, addresses 115.378 (f).

	<p>Policy 3.2 PREA, SOP Prevention, Detection, Response, J.1.b., Idaho Code Title 18, Chapter 61, Section 18-6110, addresses 115.378 (g).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.378: Interventions and Disciplinary sanctions for residents.</p>
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115.381	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. Idaho State Law Parental Rights Medical 3. 16-1605 Idaho State Code 4. Vulnerability Assessment Samples <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health staff 2. Medical Staff 3. Risk of Victimization and Abusiveness <p>115.381 (a): The Snake River Juvenile Detention Center provides a follow-up meeting with a medical and mental health practitioner for residents who discloses any prior sexual victimization during screening within 14 days of the intake screening. The SOP Prevention, Detection, and Response outlines the following steps in section E, Juvenile Assessment and Placement. Juvenile Detention Officers are responsible for gathering information not only during intake but also throughout the juvenile’s stay. This information enables staff to make informed decisions about placement and determine whether increased supervision or additional safety measures are needed. To ensure the safety of all juveniles in the facility and protect them from physical or sexual abuse, staff will collect details using assessment tools and direct conversation, including: current charges and offense history, age, emotional and cognitive development, physical size and stature, signs of intellectual or developmental disabilities, and any data suggesting a need for separation from peers. This may include prior sexual victimization, sexual orientation or gender identity, history of sexual abuse, mental health status, and mental or physical disabilities, with sensitive information shared only when necessary for immediate safety needs.</p>

All information gathered by Juvenile Detention Officers will be placed in the medical file for review by medical and mental health practitioners. These practitioners will use the information to further discuss topics such as sexual orientation, prior victimization, history of abuse, mental health, and disabilities with the juveniles. Practitioners will then provide written need-to-know summaries for distribution to staff, strictly for the purpose of ensuring the safety and protection of every juvenile from sexual abuse. The Medical RN stated in her interview that medical staff provide clinic hours three days a week at the Center, and all new residents are seen during clinic hours. The Mental Health staff member stated in her interview that staff refer both victims and abusers, and she follows up within one day of receiving the referral, as schedule permits. (SOP Prevention, Detection, and Response, E., Mental Health MHP Interview, Risk of Victimization Interview, Medical RN Interview)

115.381 (b): If a resident reveals past sexual abuse, whether in an institution or community, staff must offer a follow-up with a mental health practitioner within 14 days of intake screening. (Mental Health MHP interview, Risk of Victimization interview, Medical RN interview)

115.381 (c): Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff , as required by facility policy and Federal State, or local law, to inform treatment plans, security and management decisions, including housing, school and program assignments. (SOP Prevention, Detection, and Response, E. and F.b.)

115.381 (d): Residents at the Snake River Juvenile Detention Center are under the age of eighteen. Medical and mental health practitioners do not require informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting. (16-1605 Idaho State Code)

Information pertaining to treatment plans and matters related to sexual victimization or abuse is restricted to authorized mental health practitioners and management staff. Protocols governing the confidentiality of medical information are maintained. Residents are provided with notification regarding the facility's reporting obligations and are informed of the parameters defining protected information.

Medical and Mental Health personnel gather and monitor data indicative of prior sexual victimization. Disclosures by residents identifying themselves as perpetrators are documented. Mental Health staff are responsible for conducting follow-up assessments and reassessments as warranted, with such follow-up occurring within fourteen (14) days of the resident's intake screening. As noted by the Mental Health staff member, staff refer both victims and abusers, and she follows up within one day of receiving the referral, as schedule permits. All information concerning victimization or predatory behavior is disseminated strictly on a need-to-know basis.

During staff interviews, it was confirmed that information related to sexual victimization or abusiveness is communicated solely to personnel whose responsibilities require access and is shared in a manner that facilitates informed

	<p>decision-making. Notifications to appropriate Child Protective Agencies are executed when prior sexual victimization is identified. Pertinent information is utilized to guide the development of mental health treatment plans and to inform decisions regarding security, including housing, educational placement, and program assignments.</p> <p>SOP Prevention, Detection, and Response, E., Vulnerability Assessment samples, interview with Mental Health MHP, Risk of Victimization and Abuse, and Medical RN addresses 115.381 (a).</p> <p>Interview with Mental Health MHP, Risk of Victimization and Abuse, Medical RN and Vulnerability Assessment Samples, addresses 115.381 (b).</p> <p>SOP Prevention, Detection, and Response, E. and F.b., addresses 115.381 (c).</p> <p>16-1605 Idaho State Code, interview with Medical RN, Risk of Victimization and Mental Health addresses 115.381 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.381: Medical and mental health screenings; history of sexual abuse.</p>
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115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. St Luke’s Children at Risk Evaluation Services 3. 19-5303 Cost of Medical Exams <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health staff 2. Medical Staff <p>115.382 (a): Resident victims of sexual abuse shall 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. (SOP Prevention, Detection, Response, H.1.).</p> <p>115.382 (b): If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the Detention Manager and</p>

any appropriate medical and mental health practitioners. (SOP Prevention, Detection, Response, H.1.).

115.382 (c): Resident victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections treatment, in accordance with professionally accepted standards of care, where medically appropriate. (SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services).

115.382 (d): Treatment services shall be 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. (SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services, 19-5303 Cost of Medical Exams).

Medical and Mental Health Staff provide access to emergency treatment, as necessary. Upon notification, Medical and Mental Health staff determine a course of action based on their professional judgment. Treatment is timely and in accordance with professionally accepted standards. Treatment is provided without cost, regardless of the cooperation level of the victim. Interviews with Medical Staff confirm adherence to this standard.

The Snake River Juvenile Detention Center procedure indicates that residents would be taken or referred to St. Luke's Children at Risk Evaluation Services for unimpeded access to emergency medical treatment and crisis intervention services. St. Luke's sexual assault protocol makes it possible for victims of sexual assault to receive prompt and compassionate emergency care from medical professionals who understand victimization and streamline the examination time and the medical evidence-gathering process.

Access to information about emergency contraception and sexually transmitted infections prophylaxis would be provided by Medical Staff at the hospital and followed up by Medical Staff at the Snake River Juvenile Detention Center.

SOP Prevention, Detection, Response, H.1., interviews with Medical RN and Mental Health staff address 115.382 (a).

SOP Prevention, Detection, Response, H.1., addresses 115.382 (b).

SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services., interviews with Medical RN and Mental Health staff address 115.382 (c).

SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services and 19-5303 Cost of Medical Exams, addresses 115.382 (d).

The Snake River Juvenile Detention Center complies with Standard 115.382: Access to emergency medical and mental health services.

115.383 Ongoing medical and mental health care for sexual abuse victims

and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

1. SOP Prevention, Detection, Response
2. SOP Drug Screen and Pregnancy Test
3. St Luke’s Children at Risk Evaluation Services
4. 19-5303 Cost of Medical Exams

Interviews

1. Mental Health staff
2. Medical Staff

115.383 (a): The Snake River Juvenile Detention Center provides medical and mental health treatment to all residents who have reported sexual victimization. Upon release, residents treated by Mental Health staff are provided with information and the opportunity to meet with Community Mental Health staff. (SOP Prevention, Detection Response, H.1., St Luke’s Children at Risk Evaluation Services).

115.383 (b): The evaluation and treatment of sexual abuse victims shall include 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. (SOP Prevention, Detection Response, H.1., St Luke’s Children at Risk Evaluation Services, interviews with Medical RN and Mental Health staff).

115.383 (c): The facility shall provide resident victims of sexual abuse with medical and mental health services consistent with the community level of care. (interviews with Medical RN and Mental Health staff).

115.383 (d): Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. (SOP Drug Screen and Pregnancy Test, B.3. St Luke’s Children at Risk Evaluation Services).

115.383 (e): If pregnancy results, such victims shall receive timely information about and access to all pregnancy-related medical services that are lawful in the community. (St Luke’s Children at Risk Evaluation Services).

115.383 (f): Resident victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. (St Luke’s Children at Risk Evaluation Services).

115.383 (g): Treatment services shall be 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. (SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services and 19-5303 Cost of Medical Exams)

115.383 (h): The facility shall conduct a mental health evaluation of all known resident on resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by qualified mental health practitioners. (SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services)

Female residents who experience sexually abusive vaginal penetration are offered pregnancy testing. In the past twelve months, there have been no reported cases of vaginal penetration at the Snake River Juvenile Detention Center. All sexual abuse victims have access to testing for sexually transmitted diseases (STDs). STD testing and treatment are available to residents, regardless of their victim status. The facility provides medical and mental health care for both victims and individuals who have committed sexual abuse. Follow-up services information is provided to residents upon release from custody. Mental health evaluations are offered to identified abusers when deemed appropriate. Medical staff confirmed they deliver treatment services to residents affected by sexual abuse, which includes providing necessary testing and education regarding pregnancy and sexually transmitted diseases.

SOP Prevention, Detection Response, H.1., St Luke's Children at Risk Evaluation Services and interviews with Medical RN and Mental Health addresses 115.383 (a).

SOP Prevention, Detection Response, H.1., St Luke's Children at Risk Evaluation Services, and interviews with Medical RN and Mental Health addresses 115.383 (b).

SOP Prevention, Detection Response, H.1., St Luke's Children at Risk Evaluation Services, and interviews with Medical RN and Mental Health addresses 115.383 (c).

SOP Drug Screen and Pregnancy Test, B.3., St Luke's Children at Risk Evaluation Services SOP Prevention, Detection Response, H.1., and interviews with Medical RN and Mental Health addresses 115.383 (d).

St Luke's Children at Risk Evaluation Services, and interviews with Medical RN and Mental Health addresses 115.383 (e).

St Luke's Children at Risk Evaluation Services, and interviews with Medical RN and Mental Health addresses 115.383 (f).

SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services, 19-5303 Cost of Medical Exams and interviews with Medical RN and Mental Health addresses 115.383 (g).

SOP Prevention, Detection, Response, H.1., St Luke's Children at Risk Evaluation Services and interviews with Medical RN and Mental Health addresses 115.383 (h).

The Snake River Juvenile Detention Center complies with Standard 115.383: Ongoing medical and mental health care for sexual abuse victims and abusers.

115.386	Sexual abuse incident reviews
	<p data-bbox="280 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 266 564 300">Auditor Discussion</p> <p data-bbox="280 344 443 378">Documents</p> <ol data-bbox="341 445 912 479" style="list-style-type: none"> 1. SOP Prevention, Detection, Response <p data-bbox="280 524 427 557">Interviews</p> <ol data-bbox="341 624 687 741" style="list-style-type: none"> 1. Incident review team 2. Detention Manager 3. PREA Coordinator <p data-bbox="280 781 1469 983">115.386 (a) and (b): The PREA Coordinator coordinates a sexual abuse incident review at the conclusion (ordinarily within 30 days) of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. (SOP Prevention, Detection, Response, K.)</p> <p data-bbox="280 1016 1422 1173">115.586 (c): The review team includes the PREA Coordinator, Designated Facility Supervisor(s), Investigator(s), Facility Medical Health Practitioner, Facility Mental Health Practitioner and Others as appropriate. (SOP Prevention, Detection, Response, K.1.a.)</p> <p data-bbox="280 1218 756 1252">115.586 (d) The review team will:</p> <ul data-bbox="352 1319 1469 1856" style="list-style-type: none"> • Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. • Consider whether the incident or allegation was motivated by race, ethnicity, sexual orientation, gender identity, status, or perceived status, gang affiliation, or other group dynamics at the facility. • Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. • Assess the adequacy of staffing levels in that area during different shifts. • Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and • Prepare a report of its findings and any recommendations for improvement and submit such report to the Director and PREA coordinator. (SOP Prevention, Detection, Response, K.1.c.d.) <p data-bbox="280 1901 1437 2013">115.586 (e): The facility will implement the recommendations for improvement or will document its reasons for not doing so. (SOP Prevention, Detection, Response, K.2.)</p> <p data-bbox="280 2047 1437 2080">The Snake River Juvenile Detention Center staff reviews final investigative reports</p>

	<p>within 30 days of the investigation's conclusion. The review team, comprising the Detention Manager, PREA Coordinator, and relevant staff, evaluates whether procedural changes are required due to class affiliation, sexual orientation, or group dynamics. They assess the effectiveness of monitoring technology, physical barriers, and staffing patterns. A final report with recommendations is issued.</p> <p>In the past 12 months, the number of criminal or administrative investigations of alleged sexual abuse completed at the facility, followed by a sexual abuse incident review within 30 days, is reported as Zero.</p> <p>SOP Prevention, Detection, Response, K., addresses 115.386 (a).</p> <p>SOP Prevention, Detection, Response, K., addresses 115.386 (b).</p> <p>SOP Prevention, Detection, Response, K.1.a., interview with Incident review team member and the Detention Manager addresses 115.386 (c).</p> <p>SOP Prevention, Detection, Response, K.1.c.d., interview with Incident review team, PREA Coordinator, and the Detention Manager addresses 115.386 (d).</p> <p>SOP Prevention, Detection, Response, K.2., interview with Incident review team, PREA Coordinator, and the Detention Manager addresses 115.386 (e).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.386: Sexual abuse incident reviews.</p>
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115.387	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. SOP Prevention Detection Response 2. Snake River Annual PREA report 2024 and 2023. 3. Snake River Juvenile Detention Center – Twin Falls County Web page information. 4. Mini Cassia Annual Report 5. Mini Cassia JDC 2023 Final PREA Audit Report <p>115.387 (a): Snake River Juvenile Detention Center will collect uniform data for every reported incident of sexual abuse using Appendix C, Incident Based Data Collection that answers all questions from the most recent version of the Bureau of Justice Statistics’ (BJS) Survey on Sexual Violence (SOP Prevention, Detection, Response, L.1.)</p>

115.387 (b): The Snake River Juvenile Detention Center collects incident-based sexual abuse data annually. (SOP Prevention, Detection, Response, L.2.)

115.387 (c): The incident-based data collected includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice's Bureau of Justice Statistics. (SOP Prevention, Detection, Response, L.3.)

115.387 (d): The data is collected and maintained from multiple sources, including reports, investigation files, and sexual abuse incident reviews. (SOP Prevention, Detection, Response, L.3.)

115.387 (e): The Snake River Juvenile Detention Center collects incident based and aggregated data from contracted facilities. (SOP Prevention, Detection, Response, L.4.)

115.387 (f): Upon request, the facility shall provide all such data from the previous year to the Department of Justice no later than June 30. (SOP Prevention, Detection, Response, L.5.)

The facility has compiled data based on the Annual Survey of Sexual Violence report covering the years 2020-2024. This report provides a detailed account of incidents involving non-consensual youth-on-youth sexual acts, staff sexual misconduct, staff-on-youth sexual harassment, and resident-on-resident sexual harassment for each calendar year. It further delineates whether reported incidents were substantiated, unsubstantiated, unfounded, or remain under investigation. The collected information encompasses the number of each category of incident per year, along with the status of the investigations. The Auditor notes that the facility has not received any formal request from the Department of Justice to submit this data.

SOP Prevention, Detection, Response, L.1., Snake River Annual PREA report 2024 and 2023, and SSV Data, addresses 115.387 (a).

SOP Prevention, Detection, Response, L.2., Snake River Annual PREA report 2024 and 2023, and SSV Data, addresses 115.387 (b).

SOP Prevention, Detection, Response, L.3., Snake River Annual PREA report 2024 and 2023, and SSV Data, addresses 115.387 (c).

SOP Prevention, Detection, Response, L.3., Snake River Annual PREA report 2024 and 2023, and SSV Data, addresses 115.387 (d).

SOP Prevention, Detection, Response, L.4., Mini Cassia Annual Report, Mini Cassia JDC 2023 Final PREA Audit Report, addresses 115.387 (e).

SOP Prevention, Detection, Response, L.5, addresses 115.387 (f). The Facility has never received a request from the Department of Justice to provide data.

The Snake River Juvenile Detention Center complies with Standard 115.387 Data Collection.

115.388	Data review for corrective action
	<p data-bbox="280 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 564 300">Auditor Discussion</p> <p data-bbox="280 340 443 376">Documents</p> <ol data-bbox="341 443 1350 600" style="list-style-type: none"> 1. SOP Prevention Detection Response 2. Snake River Annual PREA report 2024 and 2023. 3. Snake River Juvenile Detention Center – Twin Falls County Web page information. <p data-bbox="280 640 427 676">Interviews</p> <ol data-bbox="341 743 638 824" style="list-style-type: none"> 1. PREA Coordinator 2. Agency Head <p data-bbox="280 864 1477 1146">115.388 (a): The Snake River Juvenile Detention Center will review, analyze and use all sexual abuse data, including incident-based and aggregated data, to: assess and improve the effectiveness of the facility sexual abuse prevention, detection, and response policies, procedures, practices, and training. Identify problem areas, including any racial dynamics or other group dynamics underpinning patterns of sexual abuse. Take corrective action on an ongoing basis. (SOP Prevention Detection Response, M.1.)</p> <p data-bbox="280 1187 1445 1344">115.388 (b): The report contains the facility findings and corrective actions, a comparison of the current year’s data and corrective actions with those from prior years, and an assessment of the agency’s progress in addressing sexual abuse. (SOP Prevention Detection Response, M.2.b.)</p> <p data-bbox="280 1384 1477 1541">115.388 (c): The facility’s report shall be approved by the Director and made readily available to the public through its Web site. The Annual Report is prepared, approved by the Detention Manager, and submitted to the appropriate legislative body. (SOP Prevention Detection Response, M.2.a.)</p> <p data-bbox="280 1581 1477 1738">115.388 (d): The report is made available to the public with redacted specific material when the publication presents a clear and specific threat to the safety and security of the facility. The report indicates the nature of the material redacted. (SOP Prevention Detection Response, M.2.c.d.)</p> <p data-bbox="280 1778 1452 2016">The Snake River Juvenile Detention Center PREA Coordinator and the Detention Manager review the reported sexual abuse and harassment incidents to identify problem areas and make recommendations for improvement. Policy changes are implemented to improve the Detention Center's commitment to the PREA. A copy of the report is made available to the Public online at https://twinfallscounty.org/juvenile/detention/.</p> <p data-bbox="280 2056 1477 2092">SOP Prevention Detection Response, M.1., Snake River Annual PREA report 2024 and</p>

	<p>2023, and interview with the PREA Coordinator, addresses 115.388 (a).</p> <p>SOP Prevention Detection Response, M.2.b., Snake River Annual PREA report 2024 and 2023, and interview with the PREA Coordinator, addresses 115.388 (b).</p> <p>SOP Prevention Detection Response, M.2.a., Snake River Annual PREA report 2024 and 2023, and interview with the PREA Coordinator, addresses 115.388 (c).</p> <p>SOP Prevention Detection Response, M.2.c.d., Snake River Annual PREA report 2024 and 2023, Snake River Juvenile Detention Center – Twin Falls County Web page information, and interview with the PREA Coordinator, 115.388 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.388: Data review for corrective action.</p>
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115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> 1. SOP Prevention, Detection, Response 2. Snake River Juvenile Detention Center Twin Falls County Web page information <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>115.389 (a): The Snake River Juvenile Detention Center ensures that the data collected is securely retained. (SOP Prevention Detection Response M.3.a.)</p> <p>115.389 (b): The Snake River Juvenile Detention Center makes all collected sexual abuse data, readily available to the public at least annually through its Web site. (Snake River Juvenile Detention Center Twin Falls County Web page information)</p> <p>115.389 (c): Before making collected sexual abuse data publicly available, the Center removes all personal identifiers. (SOP Prevention Detection Response M.2.c.)</p> <p>115.389 (d): The Snake River Juvenile Detention Center maintains sexual abuse data for at least 10 years after the date of its initial collection unless rules Federal, State, or local law require otherwise. (SOP Prevention Detection Response M.3.b.)</p> <p>Access to data at the Snake River Juvenile Detention Center is strictly controlled. Only the PREA Coordinator, Detention Manager, and Agency Head are authorized to</p>

	<p>review files and data. Information made available to the public is carefully redacted to ensure that no personal identifiers are disclosed. All data is retained for ten years from the date of initial collection.</p> <p>SOP Prevention Detection Response M.3.a., and the interview with the PREA Coordinator addresses 115.389 (a).</p> <p>Snake River Juvenile Detention Center Twin Falls County Web page information, and the interview with the PREA Coordinator addresses 115.389 (b).</p> <p>SOP Prevention Detection Response M.2.c., and the interview with the PREA Coordinator addresses 115.389 (c).</p> <p>SOP Prevention Detection Response M.3.b., and the interview with the PREA Coordinator addresses 115.389 (d).</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.89: Data storage, publication, and destruction.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>This report represents the fourth Prison Rape Elimination Act (PREA) audit conducted for the Snake River Juvenile Detention Center. The facility's initial PREA audit was completed in August 2016.</p> <p>The Snake River Juvenile Detention Center has participated in PREA audits during the following intervals: August 2016, August 2019, November 2022 and this current Audit September 2025. In accordance with PREA requirements, beginning August 20, 2013, and at three-year intervals thereafter, the facility has ensured the timely completion of these audits.</p> <p>The assigned auditor conducted a comprehensive review of all applicable policies, facility procedures, reports, and accreditation documentation. For the purposes of the current audit cycle, the auditor was provided with a representative sample of documents relevant to the most recent one-year period.</p> <p>The auditor was granted access to the entirety of the Snake River Juvenile Detention Center, enabling direct observation of all facility areas. Upon request, the auditor received copies of all pertinent documentation. Interviews were conducted with staff members, supervisory personnel, and facility administrators. Private, confidential interviews with residents were facilitated without restriction. Furthermore, residents were afforded the opportunity to transmit confidential communications or correspondence to the auditor, consistent with the procedures provided for attorney-client communications.</p>

	The Snake River Juvenile Detention Center complies with Standard 115.401: Frequency and scope of audits.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The Snake River Juvenile Detention Center posted the previous PREA Audits to the facility's website.</p> <p>The Snake River Juvenile Detention Center complies with Standard 115.403: Audit Contents and findings.</p>

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

	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	yes
115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate	yes

	staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes

	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	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: Prevailing staffing patterns?	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
115.313 (e)	Supervision and monitoring	
	Has the facility 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? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility 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	yes

	functions of the facility? (N/A for non-secure facilities)	
115.315 (a)	Limits to cross-gender viewing and searches	
	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
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes
115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes
115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents 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 a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes
115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility	yes

	determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	
115.315 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including:	yes

	Residents who have speech disabilities?	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's	yes

	safety, the performance of first-response duties under §115.364, or the investigation of the resident’s allegations?	
115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes
115.317	Hiring and promotion decisions	

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

	employees?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.317 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.318 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.321 (a)	Evidence protocol and forensic medical examinations	

	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (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
115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes

	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is responsible for investigating allegations of sexual abuse.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	yes
115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes
115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes

	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes
115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes
115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate	yes

	comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	

	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(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 115.321(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 115.321(a).)	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes

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

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (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
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (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.)	yes
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does	yes

	the agency attempt to ascertain information about: Age?	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes
115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked	yes

	pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes
115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes
115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when	yes

	making facility and housing placement decisions and programming assignments?	
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private	yes

	entity or office that is not part of the agency?	
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.352 (b)	Exhaustion of administrative remedies	

	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.352 (e)	Exhaustion of administrative remedies	

	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes
115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes

	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible 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?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and	yes

	the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of	yes

	the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in	yes

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

	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes
115.367 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes

115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes
115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.371	Criminal and administrative agency investigations	

(f)		
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency	yes

	does not provide a basis for terminating an investigation?	
115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.373 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency	yes

	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?	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.376 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.376 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes

115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes
115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes

	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes
115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes
115.381 (c)	Medical and mental health screenings; history of sexual abuse	

	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
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial	yes

	cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes
115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or	yes

	cooperates with any investigation arising out of the incident?	
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes

	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for	yes

	the confinement of its residents.)	
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 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 § 115.387 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 § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when	yes

	publication would present a clear and specific threat to the safety and security of a facility?	
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na

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