

PREA Facility Audit Report: Final

Name of Facility: ComCor Roberts Road Residential Treatment Facility

Facility Type: Community Confinement

Date Interim Report Submitted: 01/23/2023

Date Final Report Submitted: 07/13/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☐
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☐
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.	☐
Auditor Full Name as Signed: Karen d. Murray	Date of Signature: 07/13/ 2023

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	12/20/2022
End Date of On-Site Audit:	12/22/2022

FACILITY INFORMATION	
Facility name:	ComCor Roberts Road Residential Treatment Facility
Facility physical address:	3615 Roberts Road , Colorado Springs , Colorado - 80918
Facility mailing address:	5465 Mark Dabling Blvd., Colorado Springs, - 80918

Primary Contact	
Name:	Jenner Behan
Email Address:	jbehan@comcor.org
Telephone Number:	17194734460

Facility Director	
Name:	mark Wester
Email Address:	mwester@comcor.org
Telephone Number:	17194734460

Facility PREA Compliance Manager	
Name:	Dwight Smith
Email Address:	dsmith@comcor.org
Telephone Number:	O: 719.473.4460

Facility Characteristics	
Designed facility capacity:	352
Current population of facility:	266
Average daily population for the past 12 months:	262
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	18-65
Facility security levels/resident custody levels:	1-4
Number of staff currently employed at the	78

facility who may have contact with residents:	
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	1
Number of volunteers who have contact with residents, currently authorized to enter the facility:	2

AGENCY INFORMATION	
Name of agency:	ComCor, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	5465 Mark Dabling Boulevard , Colorado Springs , Colorado - 80918
Mailing Address:	5465 Mark Dabling Blvd., Colorado Springs, - 80918
Telephone number:	17194734460

Agency Chief Executive Officer Information:	
Name:	Mark Wester
Email Address:	mwester@comcor.org
Telephone Number:	7194734460

Agency-Wide PREA Coordinator Information			
Name:	Jenner Behan	Email Address:	jbehan@comcor.org

Facility AUDIT FINDINGS
Summary of Audit Findings
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

Number of standards exceeded:

0

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:

2022-12-20

2. End date of the onsite portion of the audit:

2022-12-22

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?

☒ Yes

☐ No

a. Identify the community-based organization(s) or victim advocates with whom you communicated:	On 12.5.2022 at 6:53 pm MST, this Auditor phoned the Colorado Department of Corrections Prison Rape Elimination Act Hotline at 800.809.2344. A message began, stating, "You have reached the crisis line, for all services please stay on the line for the next operator." After proper introductions and the reason for the call, the message stated, "Thank you for calling the SAFE Line. We are sorry an advocate was not able to answer your call. Please leave your name and number and an advocate will return your call." This Auditor left a message requesting a return call regarding advocate services, if this agency would report for or with the Client and how they provide Clients services who are confined a the ComCor facility." As of 1.2.2023 a return call was not returned. On July 5, 2023 at 3:34 pm, this Auditor phoned the advocate at 719.822.1851. A detailed message was left requesting information regarding emotional support services the contractor provides to victims of sexual abuse for the Comcor clients. On Monday, July 9, 2023 at 2:03 pm the advocate returned the call and stated she was the LCSW for Embrace, formally known as Comcor and she would provide emotional support services to clients at the Embrace program to include supporting them through a SAFE exam and ongoing services as long as the client needed.
AUDITED FACILITY INFORMATION	
14. Designated facility capacity:	352
15. Average daily population for the past 12 months:	262
16. Number of inmate/resident/detainee housing units:	41

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ 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	
36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	262
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	5
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1

42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	5
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	1
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	3
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	7
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	82
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	2
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	13

54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☒ Gender ☐ Other ☐ None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The facility provided Client rosters by gender, target and housing assignment upon arrival to the facility. The Auditor randomly chose random and targeted clients by gender and housing assignment for a total of 13 targeted and 13 random clients.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	13

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".

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	After touring both facilities, formal and informal interviews with Clients and staff this category of Clients did not appear to be in the program during the onsite review.
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	4

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	Due to the constraints and requirements of the program, the facility does not accept blind clients.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	After touring both facilities, formal and informal interviews with Clients and staff this category of Clients did not appear to be in the program during the onsite review.

64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	2
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility does not utilize segregated housing.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	13
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☒ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	9
76. Were you able to interview the Agency Head?	☒ Yes ☐ No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No
78. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
79. Were you able to interview the PREA Compliance Manager?	☐ Yes ☐ No ☒ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	☐ Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☒ No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☒ No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Messages were left for one volunteer and one contractor; however, neither returned the calls.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.	
84. Did you have access to all areas of the facility?	☒ Yes ☐ No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	☒ Yes ☐ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	☒ Yes ☐ No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	☒ Yes ☐ No
88. Informal conversations with staff during the site review (encouraged, not required)?	☒ Yes ☐ No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	3	0	3	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	4	0	4	0

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	3	0
Staff-on-inmate sexual abuse	0	1	0	0
Total	0	1	3	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	2	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

4

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

0

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. 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
Auditor Overall Determination Definitions
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: - ComCor Roberts Road Residential Treatment Facility PAQ - ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, dated 12.31.2018 - ComCor Organizational Chart, dated 11.15.2022 - ComCor Quality Assurance Coordinator Job Description, dated 1.1.2021 Interviews: - Random Residents - Targeted Residents

3. Client Support Specialists
4. Client Support Facility Managers
5. Quality Assurance / PREA Coordinator

Through interviews with residents and staff and review of resident and staff files, it is evident that this facility is implementing standard requirements in their daily protocols. Both residents and staff could speak to facility PREA practices and protocols being used as is described in the agency's PREA policy. The Quality Assurance / PREA Coordinator could attest to having the required time to implement PREA protocols in his essential daily functions.

Site Review Observation:

During the tour of the facility, the Auditor witnessed PREA Embrace flyers and yellow audit notices posted throughout both buildings. The 3950 building for male residents and is designed in a motel setting. Each of the 16 dorms on the left side of the parking lot is equipped with a single use private bathroom, behind a full door and two bunkbeds. There are no cameras in the dorms. At the far end of the property is a two-story building, with six dorms. Dorms have two to four bunkbeds, a day room and a single use bathroom behind a full door. Cross gender announcements were made as we entered each dorm. Dorms are not equipped with cameras; however, the exterior of the building has multiple cameras facing the dorms. The Administrative building has a main floor with a day room, tech office behind a large, windowed area, the Facility Manager's office. The basement houses case management offices, out of line of sight of cameras, and a copy room. All cameras were monitored in the Tech Office and all cameras appeared to be operable. The Tech Office was equipped with three cameras and a urinalysis restroom in the far back. When urinalysis testing is conducted, the adjoining day room is locked down and one staff to one resident ratios are maintained for privacy. A grievance box and supplies were witnessed hanging in the day room at the Tech Office.

During the facility tour of the Roberts Road Residential Facility (RRRF) the Auditor witnessed PREA Embrace flyers and yellow audit notices posted throughout both buildings. At the entrance of the building is the Tech Office with the same the urinalysis setting as the 3950 building. All cameras were reviewed and appeared to be in working order. A grievance box and supplies were available at the Tech Office. Also available is a Kiosk where residents could email agency personnel, file grievances and contact the PREA hotline. The RRRF was comprised of female and male dorms and day rooms. Each dorm had several bunkbeds, housing up to 48 residents each. Resident bathrooms had $\frac{3}{4}$ doors in front of toilets and PREA curtains in place for all showers, providing privacy for toileting, dressing and showering.

During the tour of both buildings blind spots were perceived and the following recommendations were provided to the facility administration.

1. Cameras be added to the case management officers in the basement and or a check in check out system be implemented for any staff removing a resident from programming to an area without camera footage. Post audit the facility created a sign in sign out system.
2. Add mirrors to female bays where lockers block staff view. Post audit mirrors have been installed.
3. Add sign to keep bathroom door in kitchen locked when not in use. Post audit a sign was hung.
4. Ensure windows to doors and offices are not covered, in total. Witnessed fully covered windows in the kitchen and the contractor Psychiatrists' office. Post audit window covers were removed.
5. Add mirror on wall opposite Phase One hallway that leads to exit. Post audit a mirror was installed.
6. Add sign to keep janitor door closed near D-Bay when not in use. Post audit door is closed when not in use.
7. Add mirror in male bathroom on far wall at end of sinks to be able to monitor blind spot at restroom entryway. Post audit a mirror was installed.
8. Cart in Laundry room in Female area causes blind spot. Place cart up against the wall. Post audit the cart was removed.

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

ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, section Policy, states, "It is the policy of ComCor, Inc. to have zero tolerance towards all forms of sexual abuse and sexual harassment and staff, interns, contractors, and volunteers will prevent, detect, and immediately report all appearances of a violation or

	allegations. ComCor, Inc., will assign an appropriately trained staff to promptly investigate all allegations.” (b) The ComCor Roberts Road Residential Treatment Facility PAQ states the PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities. The position of the PREA Coordinator in the agency's organizational structure. The Quality Assurance Coordinator serves as the PREA Coordinator. The facility provided a ComCor Organizational Chart. The organizational chart demonstrates the PREA Coordinator / Quality Assurance Coordinator reports directly to the Executive Director. The facility provided a ComCor Quality Assurance Coordinator job description. Page 1, section General Statement of Duties and Responsibilities states, “This position is responsible for establishing and manages a quality assurance system that promotes regulatory agency compliance and positively impacts the services at ComCor, Inc. Serves as the organizational subject matter expert on accreditation issues, to include coordinating and overseeing agency compliance with all applicable Prison Rape Elimination Act (PREA) standards as the agency PREA coordinator. Reviews and approves training program curriculum at all levels within the organization to ensure quality assurance and compliance with contractual standards, effective utilization of industry “best practices”, and achievement of agency goals. Ensures organizational policies and procedures are updated. Analyzes, interprets, and disseminates data for evaluation by management to determine if compliance objectives are met. Represents agency in external meetings and within local communities to maximize positive public perception of the agency as well as positioning agency for continued growth through networking.” Through such reviews, the facility meets the standards requirements.
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115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

	1. ComCor Roberts Road Residential Treatment Facility PAQ Interviews: 1. Quality Assurance / PREA Coordinator During the pre-audit phase, the Quality Assurance / PREA Coordinator conveyed the agency is a standalone facility and does not have privatized contracts. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states agency does not contract with private agencies for confinement services of their residents. Through such reviews, the facility meets the standard requirements.
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115.213	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. Post Audit: Annual Review Staffing Plan for Embrace, 7.2023 3. Post Audit: Email Communication, Subject: Monthly PREA Staffing Plan, dated 5.30.2023 Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Specialists 4. Client Support Supervisor Residents stated floor staff and supervisors are available at all times. Residents stated they are comfortable in the program and feel very safe. Residents appreciated the staff for their continued respect.

Staff and residents interviewed could attest to supervisory staff being available throughout each shift, each day.

Site Observation:

During the onsite review interviews were conducted in areas where the Auditor witnessed supervisory staff constantly providing interactive supervision to residents and Client Support Supervisors.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents is 262. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents on which the staffing plan was predicated is 270.

Post audit the facility provided an Annual Review Staffing Plan for Embrace. The staffing plan includes the following information.

- Physical layout of the facilities
- Composition of resident population
- Prevalence of Substantiated and Unsubstantiated Claims
- Other relevant factors

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility documents each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility had zero deviations from the required ratios of their staffing plan. This provision is not applicable as the facility has not deviated from the staffing plan in the past 12 months.

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states at least once every year the facility, reviews the staffing plan to see whether adjustments are needed in (1) the staffing plan, (2) prevailing staffing patterns, (3) the deployment of video monitoring systems and other monitoring technologies, or

	(4) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. Post audit information: The facility has not had a staffing plan in place. The facility Executive Director sent an email communication to eight team members on 5.30.2023 scheduling a staffing plan review for the first month of each year. The first staffing plan review was held on 1.6.2023. Through such reviews, the facility meets the standard requirements.
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115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-04, Contraband and Searches, dated 12.31.2018 3. ComCor Policy 100-13, Prison Rape Elimination Act and Investigations, dated 12.15.2022 4. ComCor Policy 200-01, Headcounts and Walkthroughs, dated 11.17.2022 Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Specialists 4. Intake staff 5. Quality Assurance / PREA Coordinator Interviews with residents demonstrated each had experienced a pat search or urinalysis at the facility. Each resident interviewed stated they had never been searched by a the opposite gender staff except a transgender resident. The transgender resident stated female staff searched her and male staff conducted urinalysis. Each resident interviewed was asked if they believed the pat searches

and urinalysis processes were done respectably and each unanimously stated the process was respectable.

Interviews with staff demonstrated searches were conducted upon admission Staff interviewed stated cross-gender searches had been trained; however, staff interviewed stated cross-gender searches would be documented if conducted on female Residents.

Site Review Observation:

During the tour the auditor was able to view the area where strip searches and urinalysis testing was conducted. Pat searches are conducted in the Tech Offices, out of line of site of other residents, under camera view. When urinalysis testing is conducted, the adjoining day room is locked down and one staff to one resident ratio are maintained for privacy.

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

ComCor Policy 200-04, Contraband and Searches, section C. Searches, states, "Searches on clients, rooms, common areas of the facility, and client vehicles will occur on a random basis to increase the likelihood of contraband detection. The following search types and minimum frequency is as follows:

1. Pat Search: Clients will receive a pat search at least five times per month including each time they return to the facility and randomly then departing the facility.

a. Contact: All contact pat searches will be completed by a staff who is the same gender or gender identity, as approved by management, as the client who is receiving the search.

b. Non-Contact: Staff of the opposite gender or gender identity will only conduct non-contact pat searches. A non-contact pat search will include the use of a metal detection wand, emptying the client's pockets, and visually inspecting the client's person.

c. Staff will conduct all pat searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.”

(b) ComCor Roberts Road Residential Treatment Facility PAQ states the facility does not permit cross-gender pat-down searches of female residents, absent exigent circumstances (facilities have until August 20, 2015, to comply; or August 20, 2017. The facility does not restrict female residents' access to regularly available programming or other outside opportunities in order to comply with this provision. The number of pat-down searches of female residents that were conducted by male staff was zero. Policy compliance can be found in provision (a) of this standard.

(c) ComCor Roberts Road Residential Treatment Facility PAQ states the facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.

ComCor Policy 200-04, Contraband and Searches, section C. Searches, 1. d., states, “Staff will document all cross-gender pat-down searches of female residents.”

(d) ComCor Roberts Road Residential Treatment Facility PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing.

ComCor Policy 200-01, Headcounts and Walkthroughs, section Headcounts A. 5., states, “Staff will announce male/female staff when entering an area where the opposite sex has an expectation of privacy i.e. room, bay or restroom.”

ComCor Policy 100-13, Prison Rape Elimination Act and Investigations, section H. Privacy, states, “ComCor, Inc. shall 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.”

	(e) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Such searches (described in 115.215(e)-1) occurred in the past 12 months was zero. ComCor Policy 200-04, Contraband and Searches, section C., Searches, 5. a., states, "Staff are prohibited from searching or physical examining a transgender or intersex resident for the sole purpose of determining the resident's genital status." (f) The ComCor Roberts Road Residential Treatment Facility PAQ states 100% of all security staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs. Through such reviews, the facility meets the standard requirements.
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115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-22, PREA, dated 11.30.2022 3. Post Audit: Making Connections Nationwide – In-Person Interpretation Contract, dated 1.25.2023 Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Specialists

4. Client Support Supervisor
5. Quality Assurance / PREA Coordinator
6. Executive Director

The interview with a LEP resident and a translator demonstrated the resident did not have a full understanding PREA reporting options. Of the five cognitive and one hard of hearing residents, each understood PREA and reporting options available to them.

During interviews with staff, each stated residents were not used for translation services. Barriers were not apparent during interviews and or on the facility tour.

The Client Support Supervisor stated residents are educated at the time of intake by having PREA material read to them and they view a PREA video.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has established procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

ComCor Policy 200-22, PREA, section Policy, states, "Within 12 hours of admission ComCor staff shall provide the client with materials related to the prevention of sexual assault and inappropriate sexual relations within the program. Such materials shall be available in English and in Spanish. For clients with disabilities, to include those who are deaf, hard of hearing, blind or have low vision, or those who have intellectual, psychiatric or speech disabilities, ComCor will take appropriate steps to ensure that these clients have equal opportunity to participate in and benefit from all aspects of the efforts to prevent, detect and respond to sexual abuse and sexual harassment, to include providing access to interpreters who can interpret effectively, accurately, and impartially. Additionally, we will provide written materials provided in formats that ensure effective communication with clients with disabilities. ComCor will not rely on client interpreters, readers or other types of client assists except in limited circumstances where a delay in obtaining and effective interpreter could compromise client safety or an investigation of allegations.

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has established procedures to provide residents with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual

	harassment. ComCor Policy 200-22, PREA, section B., states, “Such materials shall be available in English and in Spanish. If the client’s primary language is not English or Spanish, or if the client is Deaf or hard of hearing, within one business day, the program shall arrange for a translation service to read or translate the information to the offender in his/her principal language. (Programs may contact the DCJ to arrange for LanguageLine™ telephonic translation services.)” Post audit the facility provided a Making Connections Nationwide – In-Person Interpretation Contract. The contract states, “Client has entered into contract with IU, a language service provider to engage the services of linguists to perform language services, including, but not limited to, in-person interpretation, telephone interpretation, video interpretation and document translation.” (c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations. If YES, the agency or facility documents the limited circumstances in individual cases where resident interpreters, readers, or other types of resident assistants are used. In the past 12 months, the number of instances where resident interpreters, readers, or other types of resident assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident’s safety, the performance of first-response duties under § 115.264, or the investigation of the resident’s allegations was zero. Policy compliance can be found in provision (a) of this standard. Through such reviews, the facility meets the standard requirements.
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115.217	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard Auditor Discussion Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ

2. ComCor Policy 100-04, Staff Recruitment, dated 12.31.2018

Interviews:

1. Director of Human Resources

Interviews with the Director of Human Resources demonstrated applicants determined to have been convicted of sexual abuse or sexual harassment charges were screened out during the application review process.

Site Review Observation:

Review of 16 personnel resulted in all having a current criminal history check, completed adjudication questions with the date of the application and or promotion and completed institutional reference checks on applicable applicants.

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

ComCor Policy 100-04, Staff Recruitment, section 5. Prison Rape Elimination Act, 5., Prison Rape Elimination Act Hiring Requirements, a.-c., state, “

a. “ComCor, Inc. will not hire any staff who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution.

b. ComCor, Inc. will not hire any person 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; or

c. ComCor, Inc. will not hire any person who has been civilly or administratively adjudicated to have engaged sexual abuse or sexual activity by force.”

ComCor Policy 100-04, Staff Recruitment, section 5. Prison Rape Elimination Act, 5. f., states, "ComCor, Inc. will perform a background check on existing staff, contractors and volunteers every 5 years. A background check will also be performed when staff receive a promotion."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

ComCor Policy 100-04, Staff Recruitment, section A. Pre-Employment Background Checks, 1. states, "Pre-Employment and Employment Background Checks: ComCor, Inc. will conduct criminal background checks on all candidates for employment, contract, or volunteer positions at the time a conditional employment offer is made. ComCor, Inc. will submit the name, birthdate, and social security number of the applicant to the Division of Criminal Justice, Office of Community Corrections.

1. ComCor, Inc.'s will not extend employment offers to any individual who is required to register pursuant to the provisions of the Colorado Sex Offender Registration Act."

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months, the number of persons hired who may have contact with residents who have had criminal background record checks is 39.

ComCor Policy 100-04, Staff Recruitment, section A. Pre-Employment and Employment Background Checks, 3. Fingerprints, a-b. states, "ComCor, Inc. will send the conditional hire's fingerprints to the Division of Criminal Justice, Office of Community Corrections within 15 days of the first day of employment.

a. Until the fingerprint record check is complete the conditional hire will not work without direct supervision. If the fingerprint record check is not completed within 30 days and the name check was clear the facility director may authorize the employee to work without direct supervision.

b. ComCor, Inc. and the conditional hire agree to submit new fingerprint cards if the original is rejected within 15 days of the notice of the rejections."

ComCor Policy 100-04, Staff Recruitment, section 5. Prison Rape Elimination Act, 5. e., states, "ComCor, Inc. will conduct institutional reference checks on all applicable applicants."

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with residents. In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents is one. Policy compliance can be found in provision (c) of this standard.

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

ComCor Policy 100-04, Staff Recruitment, section A. 6., states, "ComCor, Inc. will perform a background check on existing staff every 5 years."

(f) ComCor Policy 100-04, Staff Recruitment, section A. 5. Prison Rape Elimination Act, d., states, "ComCor, Inc. will ask all applicants and staff who have client contact about previous misconduct as a part of the written application and interview process. Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination."

(g) The ComCor Roberts Road Residential Treatment Facility PAQ states agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Policy compliance can be found in provision (f) of this standard.

(h) ComCor Policy 100-04, Staff Recruitment, section A. 8., states, "ComCor, Inc. will provide, upon request, any documentation on previous employees from another institution where the candidate has applied to work."

	Through such reviews, the facility meets the standard requirements.
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115.218	Upgrades to facilities and technology
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. Post Audit: Document – Subject: PREA Audit 115.218 (a)-1 Facility Modifications Interviews: 1. Quality Assurance / PREA Coordinator The Quality Assurance / PREA Coordinator attested to the facility going under modifications in the last audit cycle to primarily consisting of adding cameras. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit. The PAQ states, “3615 Roberts Road Facility finished being remodeled in November 2020.” The facility provided a document in regard to facility modifications stating the following. “In November 2020 newly renovated Phase 3 at 3615 Roberts Rd. was opened. The renovation included living space for 108 clients, kitchen/dining facilities and space for treatment services. This move consolidated the infrastructure from 3 buildings to 1 building. The former clinical building 2723 N. Nevada, former kitchen/dining facilities at 3820 N. Nevada and housing facility at 3808 N. Nevada were vacated.” (b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later. The PAQ states, “Both the 3950 facility and 3615 facility installed new cameras and a new camera system.”

	Through such reviews, the facility meets the standard requirements.
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115.221	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, dated 12.15.2022 3. UCHealth SANE Email Communication, dated 4.27.2023 4. Post Audit: Agreement for Purchase of Consulting Services, dated 2.1.2023 5. Post Audit: Law Enforcement Email Communication, dated Interviews: 1. Clinical Manager 2. Quality Assurance / PREA Coordinator 3. Executive Director Interviews with administration demonstrated all residents alleging sexual abuse would be offered a sexual abuse forensic exam (SAFE) by a sexual abuse nurse examiner (SANE). Site Review Observation: The facility has had one resident who underwent a SAFE exam. The exam was conducted on the same day of receipt of the allegation. Site Review Observation: The investigation demonstrated the facility promptly provided a forensic examination for the resident.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency/facility is responsible for conducting administrative sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The agency/facility is not responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The Colorado Springs Police Department is responsible for conducting sexual abuse investigations.

ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, section A. Reporting Duties 1.-2., states, "Upon learning of any allegation, suspicion, or information that a client was sexually abused, sexually harassed, or is at risk to be sexually abused or harassed, staff will immediately:

1. Separate the alleged victim and abuser;
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
 - a. Alleged Victim: If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.
 - 1) Allow the victim to go to the hospital for a forensic medical examination and to Ensure the victim has access to emergency timely access to emergency contraception, and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
 - 2) Distribute to the alleged victim the contact information for a victim advocate. The victim's advocate will be allowed to accompany the alleged victim to the forensic medical examination and investigative interviews."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the protocol being developmentally appropriate is not developmentally appropriate for youth as the facility does not house youthful offenders. The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

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

ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, section A. Reporting Duties, 2. a. 1., states, "Allow the victim to go to the Memorial hospital for a forensic medical examination and to ensure the victim has access to emergency timely access to emergency contraception, and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate."

Post audit the facility provided an email communication from the Memorial Central Emergency Department's Forensic Nurse Examiner Team on 4.27.2023, stating, "At UCHHealth Memorial, the Forensic Nurse Examiner department see all patients who are victims of violence, including sexual assault. We are located within the emergency department and are 4/7.

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility attempts to make available to the victim a victim advocate from a rape crisis center, either in person or by other means. The efforts are documented. If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.

Post audit the facility provided an Agreement for Purchase of Consulting Services, the contract appears to be current and is dated 2.1.2023 and signed by the Embrave Executive Director and the contractor.

(e) The ComCor Roberts Road Residential Treatment Facility PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals. The facility does not provide a qualified staff as they have entered into an agreement with an

	advocate service. (f) The ComCor Roberts Road Residential Treatment Facility PAQ states, if the agency is not responsible for investigating allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.221 (a) through (e) of the standards. The facility provided an email communication attempt at requesting a memorandum of understanding with the Commander of the Colorado Springs Police Department. (g) Compliance regarding a qualified staff can be found in provision (e) of this standard. Through such reviews, the facility meets the standard requirements.
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115.222	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, dated 12.31.2018 Interviews: 1. Quality Assurance / PREA Coordinator / Agency Investigator The interview with the agency Investigator demonstrated upon receipt of a sexual harassment or sexual abuse investigation, she would immediately begin an investigation. Site Review Observation:

	The facility has had a total of two sexual harassment and four sexual abuse investigations in the last 12 months. (a/c-e) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had 12 allegations of sexual abuse and sexual harassment that were received. In the past 12 months, the number of allegations referred for criminal investigation was two. Referring to allegations received during the past 12 months, all administrative and/or criminal investigations were completed. ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, section B. Investigation, 1-2, states, "The PREA coordinator will assign a qualified and trained investigator to complete the PREA investigation. 1. All ComCor, Inc. staff are required to cooperate with any PREA investigation. 2. Referral for Investigation by the Colorado Springs Police Department: The assigned PREA investigator in coordination with the PREA coordinator and vice president of operations will determine if the allegation should be reported to the Colorado Springs Police Department for investigation as a criminal offense. a. The administrative investigation will be suspended until the Colorado Springs Police Department has made a determination on whether the incident will be referred for criminal charges. b. Once a determination has been made the assigned investigator will document that decision in the internal report and proceed with the administrative investigation." (b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. Policy compliance can be found in provision (a) of this standard. The agency investigation policy is available on the agency website at PREA - Comcor. Through such reviews, the facility meets the standard requirements.
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. ComCor Roberts Road Residential Treatment Facility PAQ
2. ComCor Policy 100-07, Staff Development and Training, dated 12.31.2018
3. ComCor Prison Rape Elimination Act PowerPoint Training, not dated
4. Post Audit: PREA Refresher Training Spreadsheet, dated within year 2021 and 2022

Interviews:

1. Client Support Specialists
2. Specialized staff
3. Director of Human Resources

Interviews with staff demonstrated each received PREA training upon hire, throughout each year and as an annual requirement.

Site Observation:

Review of the 16 personnel files demonstrated each staff interviewed had completed PREA training either annually and or consistently, every year, for the past two years.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency trains all employees who may have contact with residents on the agency's zero-tolerance policy for sexual abuse and sexual harassment.

ComCor Policy 100-07, Staff Development and Training, section C. Prison Rape Elimination Act Training, C. Prison rape Elimination Act Training: 1. A-o., states, "Staff: ComCor staff are required to be trained upon hire and every year thereafter regarding the requirements of the Prison Rape Elimination Act, to include the following objectives

- a. Gain a better understanding of PREA and how it affects Community Corrections.
- b. Educate staff to recognize signs of sexual abuse and sexual harassment and to

report it to the appropriate personnel.

- c. Apply appropriate strategies to intervene when staff suspect prohibited sexual behavior
- d. Understand the correctional culture and how changes in staff attitudes will reduce and prevent, prohibited sexual behavior.
- e. Have a thorough understanding of providing medical aid to the victim, security procedures and what to do following an incident.
- f. The zero-tolerance policy for sexual abuse and sexual harassment;
- g. How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- h. Residents' right to be free from sexual abuse and sexual harassment;
- i. The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- j. The dynamics of sexual abuse and sexual harassment in confinement;
- k. The common reactions of sexual abuse and sexual harassment victims;
- l. How to detect and respond to signs of threatened and actual sexual abuse;
- m. How to avoid inappropriate relationships with residents;
- n. How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; and
- o. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities."

The facility provided a ComCor Prison Rape Elimination Act PowerPoint Training. Course objectives include the following.

- Gain a better understanding of PREA and how it affects Community Corrections.
- Discuss the Community Corrections zero tolerance policy
- Educate staff to recognize signs of sexual abuse and sexual harassment and to report it to the appropriate personnel.
- Apply appropriate strategies to intervene when staff suspect prohibited sexual behavior.
- Understand the correctional culture and how changes in staff attitudes will

reduce and prevent, prohibited sexual behavior.

- Have a thorough understanding of providing medical aid to the victim, security procedures and what to do following an incident.
- The Goals of PREA
- Important Definitions
- Sexual Conduct in Community Corrections
- PREA and Professional Boundaries
- False Allegations
- Disciplinary Sanction for Clients
- Client Orientation and Education
- Client Intake and Assessment
- Behaviors of a Sexual Aggressor
- Sexual Assault Victim / Traits
- Sexual Assault Impact
- LGBTQI Client PREA Considerations / Communications / Respectful Language / Pronouns
- Effective Communication
- Discussing Gender and Sexual Orientation
- Retaliation / Protection Against Retaliation / Monitoring Retaliation
- Client Reporting
- Staff Options for Reporting
- Staff Reporting Procedures
- Community Corrections Employees Are Mandatory Reporters
- PREA First Responders
- Security Procedures for Sexual Assault
- Crime Scene Management Priorities
- Handling Evidence
- Forensic Medical Exam by Sexual Assault Nurse Examiner (SANE)

	· ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation · Your Role (b) The ComCor Roberts Road Residential Treatment Facility PAQ states training is tailored to the gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. The PAQ states, “all facilities are co-ed. Have not reassigned any employees in the last two years.” (c) The ComCor Roberts Road Residential Treatment Facility PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements annually or when needed. The facility provided a PREA Refresher Training Spreadsheet. The spreadsheet demonstrates 44 employees completed refresher training in calendar year 2022. (d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification. The facility provided a PREA Training spreadsheet demonstrating PREA Refresher training had been completed in the months of April, May, June, October, November and December of 2021. Through such reviews, the facility meets the standard requirements.
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115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

1. ComCor Roberts Road Residential Treatment Facility PAQ
2. ComCor Policy 100-07, Staff Development and Training, dated 12.31.2018
3. ComCor Prison Rape Elimination Act PowerPoint Training, not dated
4. Post Audit: PREA Training Acknowledgment

Interviews:

1. Director of Human Resources

The interview with the Director of Human Resources demonstrated volunteers and contractors receive the same training as employees, before they have access to residents.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The number of volunteers and contractors, who may have contact with residents, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response is three.

ComCor Policy 100-07, Staff Development and Training, section C. Prison Rape Elimination Act Training: 2. Volunteers and Contractors, states, "Before having contact with clients, all volunteers and contractors are required to be training on their responsibilities to prevent, detect, and respond to sexual abuse and sexual harassment."

The facility provided a ComCor Prison Rape Elimination Act PowerPoint Training. Course objectives include the following.

- Gain a better understanding of PREA and how it affects Community Corrections.
- Discuss the Community Corrections zero tolerance policy
- Educate staff to recognize signs of sexual abuse and sexual harassment and to report it to the appropriate personnel.
- Apply appropriate strategies to intervene when staff suspect prohibited sexual behavior.

- Understand the correctional culture and how changes in staff attitudes will reduce and prevent, prohibited sexual behavior.
- Have a thorough understanding of providing medical aid to the victim, security procedures and what to do following an incident.
- The Goals of PREA
- Important Definitions
- Sexual Conduct in Community Corrections
- PREA and Professional Boundaries
- False Allegations
- Disciplinary Sanction for Clients
- Client Orientation and Education
- Client Intake and Assessment
- Behaviors of a Sexual Aggressor
- Sexual Assault Victim / Traits
- Sexual Assault Impact
- LGBTQI Client PREA Considerations / Communications / Respectful Language / Pronouns
- Effective Communication
- Discussing Gender and Sexual Orientation
- Retaliation / Protection Against Retaliation / Monitoring Retaliation
- Client Reporting
- Staff Options for Reporting
- Staff Reporting Procedures
- Community Corrections Employees Are Mandatory Reporters
- PREA First Responders
- Security Procedures for Sexual Assault
- Crime Scene Management Priorities
- Handling Evidence
- Forensic Medical Exam by Sexual Assault Nurse Examiner (SANE)

- ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation
- Your Role

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

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received.

Post audit the facility provided 14 PREA Training Acknowledgments signed and dated by volunteers. The acknowledgement states the following.

I acknowledge and have an understanding of the below objectives as it relates to the Prison Rape Elimination Act of 2003:

- An understanding of PREA and how it affects Community Corrections.
- The Community Corrections zero tolerance policy.
- Recognizing the signs of sexual abuse and sexual harassment and to report it to the appropriate personnel.
- How to apply appropriate strategies to intervene when staff suspect prohibited sexual behavior.
- Understand the correctional culture and how changes in staff attitudes will reduce and prevent, prohibited sexual behavior.
- Have a thorough understanding of providing medical aid to the victim, security procedures and what to do following an incident.

Through such reviews, the facility meets the standard requirements.

115.233	Resident education
	Auditor Overall Determination: Meets Standard Auditor Discussion Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-19, Intake and Facility Room Assignment, dated 12.31.2018 3. ComCor Reporting Flyer in English and Spanish 4. Post Audit: Embrace Client Acknowledgment of Zero Tolerance Policy, not dated Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Services Supervisor Interviews with residents demonstrated each understood their knowledge of PREA, reporting options directly to staff, contacting a third party, filing a grievance, call hotline numbers posted on Embrace PREA flyers and reports could be anonymous. The interview with the Client Support Services Supervisor demonstrated he delivered PREA education during the intake process. The Supervisor stated he reads PREA information to residents, reviews the agency PREA policy, how to report, the investigation process and resident rights. Site Observation: Of the 12 resident files reviewed, each had documentation demonstrating PREA education was provided; however, resident participation documentation included education of the PREA video without evidence of review of the agency PREA policy, how to report, the investigation process and resident rights. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states residents receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, their rights to be free from

sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The number of residents admitted during past 12 months who were given this information at intake was 565.

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility provides residents who are transferred from a different community confinement facility with refresher information referenced in 115.233(a)-1. The number of residents transferred from a different community confinement facility during the past 12 months was not captured. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was not captured. The PAQ states, "All clients go through PREA orientation at intake. We do not track the number coming from another community confinement facility." The facility understands the need to ensure all intakes, regardless of past commitment, are provided PREA education particular to the ComCor Roberts Road Residential Treatment Facility PREA policies and reporting information.

ComCor Policy 200-19, Intake and Facility Room Assignment, section D. Transfer, states, "Clients will receive a refresher training on the Prison Rape Elimination Act when they are transferred between ComCor facilities. This refresher will be documented in the CorrectTech system."

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states Resident PREA education is available in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled and those who have limited reading skills.

ComCor Policy 200-19, Intake and Facility Room Assignment, section A. 4. Prison Rape Elimination Act Notifications, states, "Upon intake clients will be instructed that ComCor, Inc. has a zero-tolerance policy regarding sexual abuse and sexual harassments. Clients have the right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. Clients will be offered a ComCor, Inc. Client Handbook which contains information regarding the program and how to report incidents of sexual abuse or sexual harassment and the ComCor policy on responding to such incidents."

The facility provided a ComCor Reporting Flyer in English and Spanish. The flyer consists of the following information.

- Call CDOCTIPS Line 1.877.DOC.TIPS (1.877.362.8477)
- Contact Tessa Crisis Hotline 719.633.3819
- Contact PREA Officer Jenner Behan 719.473.4460 Ext. 410

Report Sexual Assault – Sexual activity between clients or clients and staff is prohibited

ComCor, Inc., does not monitor phone contact to sexual abuse reporting or advocacy agencies such as TESSA or DOC Tips Line. Contact with these agencies is confidential except when communication may invoke the State Reporting law, such as harm to self or others.

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency maintains documentation of resident participation in PREA education sessions.

Post audit the facility provided a Embrace Client Acknowledgment of Zero Tolerance Policy. Clients affirm to the following.

- I have received a copy of the Embrace Residential Client Handbook
- I understand the zero tolerance policy regarding sexual abuse, sexual misconduct and sexual harassment
- I received information about and understand how to report incidents or suspicions of sexual abuse or harassment and my right to be free of retaliation for reporting. I had the opportunity to ask questions, and any questions were answered to my full understanding.
- I received information on how to report to the facility PREA Manager, rape crisis center advocate and hotline numbers.

(e) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats. Practice compliance is demonstrated through provision (c) of this standard.

Through such reviews, the facility meets the standard requirements.

115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, dated 12.31.2018 3. ComCor Policy 100-07, Staff Development and Training, dated 12.31.2018 4. Specialized Investigator Training Spreadsheet 5. Post Audit: Investigator Training Certificate, dated 2.17.2023 Interviews: 1. Quality Assurance / PREA Coordinator – Agency Investigator Interviews with the Agency Investigator demonstrated each had not completed specialized training for investigators as is required by this standard. Site Observation: Investigator training files demonstrated the investigator had not completed PREA Specialized training for investigators. Action Plan: Post audit the facility provided an Embrace PREA Specialized Training: Investigating Sexual Abuse in Correctional Settings training certificate for 15 hours of education. (a-b) The ComCor Roberts Road Residential Treatment Facility PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. The PAQ states, “Current investigators are POST certified or NIC trained.” ComCor Policy 100-13, Prison Rape Elimination Act and Investigation, section B. Investigation, states, “The PREA coordinator will assign a qualified and trained

	investigator to complete the PREA investigation.” ComCor Policy 100-07, Staff Development and Training, section C. Prison Rape Elimination Act Training, 3. Specialized Investigators, states, “ComCor, Inc. will select and train specialized staff who will investigate all claims of sexual abuse and sexual harassment. Specialized training will include techniques for interviewing victims, proper use of Miranda and Garrity warnings, evidence collection, and the criteria required to substantiate an administrative or prosecutorial referral.” (c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency maintain documentation showing that investigators have completed the required training. The number of investigators currently employed who have completed the required training is three. The facility provided a Specialized Investigator Training spreadsheet. The spreadsheet demonstrates three facility staff completed training in 2020 and 2021. Through such reviews the facility meets the standard requirements.
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115.235	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-07, Staff Development and Training, dated 12.31.2018 3. Post Audit: PREA Training Acknowledgment Interviews: 1. Clinical Manager The interview with the Clinical Manager demonstrated she had recently completed specialized training for medical and mental health staff.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency does have a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The facility has five medical and mental health staff. The percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is 100% (seven).

ComCor Policy 100-07, Staff Development and Training, section C. Prison Rape Elimination Act Training, 4. Mental Health, states, "Mental Health: All Clinical Treatment Services mental health practitioners are required to be trained in:

- a. How to detect and assess signs of sexual abuse and sexual harassment;
- b. How to preserve physical evidence of sexual abuse;
- c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
- d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency medical staff at this facility do not conduct forensic medical exams.

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training.

Post audit the facility provided 14 PREA Training Acknowledgments signed and dated by volunteers. The acknowledgement states the following.

I acknowledge and have an understanding of the below objectives as it relates to the Prison Rape Elimination Act of 2003:

- An understanding of PREA and how it affects Community Corrections.
- The Community Corrections zero tolerance policy.
- Recognizing the signs of sexual abuse and sexual harassment and to report it to the appropriate personnel.

	· How to apply appropriate strategies to intervene when staff suspect prohibited sexual behavior. · Understand the correctional culture and how changes in staff attitudes will reduce and prevent, prohibited sexual behavior. · Have a thorough understanding of providing medical aid to the victim, security procedures and what to do following an incident. Through such reviews the facility meets the standard requirements.
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115.241	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-18. Intake and Facility Room Assignment, dated 12.31.2018 3. Colorado Division of Criminal Justice – Office of Community Corrections Screening for Risk of Sexual Victim Vulnerability/Abusiveness, not dated 4. Post Audit: Bed Tracking Spreadsheet 5. Post Audit: Email Communication, Subject: PREA Bed Tracking Expectation, dated 5.5.2023 Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Supervisor Residents interviewed demonstrated they remembered being asked questions regarding past sexual victimization, their sexual orientation, criminal history and their perception of safety. Interviews with the Client Support Supervisor demonstrated he screens all intakes

and assess their mental, emotional and physical disabilities, their height and weight if they are LGBTI, past victimization or abuse, institutional violence, perceive themselves as being a victim or abusive and previous incarcerations. The Client Support Supervisor stated risk screenings are conducted in a private office with himself and the resident and residents are screened again within 30 days.

Site Observation:

Review of 12 resident files demonstrated that residents had not been consistently reassessed within 30 days of admission or after sexual abuse allegations.

Post audit the facility provided an email communication from the Executive Director to Management@embrave.org stating, "Historically we have not been the best at keeping track of our PREA bed assignments and 30-day follow-ups. The information needs to be continually monitored and up-to-date. To make sure this doesn't slip between the cracks again, we will have this information sent to Jenner every three days to audit. We will continue this practice until it becomes reflective, keeping us in line with PREA Standards."

Post audit the facility provided a Bed Tracking spreadsheet demonstrating 30-day reassessments are tracked by the Quality Assurance Coordinator to include the following information.

- Bunk
- Client Name
- Program
- Est. Release Date
- PREA Risk
- PREA 30 Day
- Gender
- BBR
- Disability Status
- Comments

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency

has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents.

ComCor Policy 200-18. Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. a., states, "Staff will be assigned rooms and beds to clients upon entry to ComCor, Inc. Discretion will be used in assigning rooms and will consider safe and secure operating practices. The room and bed assignment will be entered into the CorrectTech database.

1. Prison Rape Elimination Act Considerations:

a. All client room assignments will be screened by the security manager within 3 days of initial assignment for risk of being sexually abused by others or being sexually abusive towards other clients. The assessment will consider:

- 1) Whether the client has a physical, mental, or developmental disability.
- 2) The age of the client.
- 3) The physical build of the client.
- 4) Whether the client has been previously incarcerated.
- 5) Whether the client's criminal history is exclusively non-violent.
- 6) Whether the client has prior convictions of sex offenses against an adult or a child.
- 7) Whether the client is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming.
- 8) Whether the client has previously experienced sexual victimization.
- 9) The client's own perception of vulnerability.
- 10) Client's prior acts of sexual abuse, violent offenses, and institutional conduct in assessing risk for being sexual abusive."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. The number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility was 536. Policy compliance can be

found in provision (a) of this standard. Policy compliance can be found in provision (a) of this standard.

(c-e) The ComCor Roberts Road Residential Treatment Facility PAQ states the risk assessment is conducted using an objective screening instrument.

The facility provided a Colorado Division of Criminal Justice – Office of Community Corrections Screening for Risk of Sexual Victim Vulnerability/Abusiveness. The risk screening includes the following.

- Name / Diversion / DOC Date
- Staff Name / Staff Signature
- Youthful age (under 22 years old)
- Elderly age (over 60 years old)
- Males: 5’6” and/or less than 140 lbs.
- Females: 5’ and/or less than 100 lbs.
- Mental/Illness/Developmental disability
- Physical disability
- First Incarceration
- History of non-violent crimes only
- History of sex offense convictions
- History of sexual victimization
- Feels vulnerable to victimization
- Identifies as LGBTI or is perceived as LBBTI
- Other Factors

Victim / Vulnerability

- Non-victim (If no to all factors)
- Known victim (If yes to #10)
- Possible victim (If yes to 2 or more)

Aggressive/Abusiveness Factors

- History of sexual abusiveness (in community)
- Gang Affiliation
- History of Institutional violence or sexual abuse
- History of violent convictions (in community)
- Other factors (explain)

Aggressive / Abusiveness

- Known Abuser (#1 or #3)
- Possible Abuser (If yes to 2 or more)
- Non-abuser (no factors)

(f) The ComCor Roberts Road Residential Treatment Facility PAQ states the number of residents entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was not captured. The PAQ states, "Numbers have not been documented. memo sent to facility managers to have this completed."

ComCor Policy 200-18. Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. b., states, "Clients will be reassessed prior 30 days from the intake for risk of victimization based on any additional relevant information received since the intake screening."

(g) The ComCor Roberts Road Residential Treatment Facility PAQ states the policy requires that a resident's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness.

ComCor Policy 200-18. Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. c., states, "Client's risk levels will be reassessed

	when there is a request, referral, incident of sexual abuse or receipt of information that indicated an increase in the risk of sexual victimization.” (h) The ComCor Roberts Road Residential Treatment Facility PAQ states the policy prohibits disciplining residents for refusing to answer (or for not disclosing complete information related to) the questions regarding: (a) whether or not the resident has a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the resident’s own perception of vulnerability. ComCor Policy 200-18. Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. d., states, “Clients are not required to disclose the answers to a.1, a.7, a.8, or a.9.” (i) ComCor Policy 200-18. Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. e., states, “The results of the security manager’s assessment are confidential and will not be shared or exploited to the client’s detriment by staff or other clients.” Through such reviews, the facility meets the standard requirements.
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115.242	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-19, Intake and Facility Room Assignment, dated 12.31.2018 3. Post Audit: PREA Restricted Access to Members Interviews: 1. Resident Monitor Supervisor

Interviews with the Resident Monitor Supervisor demonstrated risk assessments were documented in the facility database and all staff had access to completed risk assessment.

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

ComCor Policy 200-19, Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. f., states, "The security manager will utilize the results of the intake assessment to keep clients separate who are at high risk for being sexually victimized from those who are at high risk for being sexually abusive."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each resident.

ComCor Policy 200-19, Intake and Facility Room Assignment, section B. 1. i., states, "ComCor, Inc. makes individualized determinations about how to ensure the safety of each resident."

(c/d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency/facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis.

ComCor Policy 200-19, Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. g., states, "ComCor, Inc. management will make decisions on housing transgender or intersex clients in male or female facilities on a case by case basis to promote the client's well-being and ensure safe and secure operations. The opinion of the transgender or intersex client will be strongly taken into consideration."

Post audit the facility provided a PREA Restricted Access to Members designated nice total members and two account owners.

	(e) ComCor Policy 200-19, Intake and Facility Room Assignment, section B. Facility Room and Bed Assignment, 1. h., states, "Transgender or intersex clients will be given the opportunity to shower separately from other clients and will not be housed in a dedicated area solely based upon their transgender or intersex status." Through such reviews, the facility meets the standard requirements.
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115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-13, Grievance Procedures, dated 9.1.2019 3. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 4. ComCor Policy 100-06, Communication Plan, dated 12.31.2018 5. ComCor Prison Rape Elimination Act PowerPoint Presentation Training, not dated Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Specialists 4. Quality Assurance / PREA Coordinator Interviews with residents demonstrated each understood their knowledge of PREA, reporting options directly to staff, contacting a third party, filing a grievance, call hotline numbers posted on PREA flyers and reports could be anonymous. Interviews with Client Support Specialists demonstrated they would accept any form of report of sexual harassment and sexual abuse from a resident. Client Support

Specialists stated they would help a resident report at any time.

Site Observations:

Critical phone testing was not completed during the onsite review as residents are allowed access to their cell phones at all times and were seen using cell phones during tours of both buildings.

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

ComCor Policy 200-13, Grievance Procedures, section D. Grievances Regarding Sexual Misconduct, 1., states, "Clients may report grievances or information regarding sexual misconduct utilizing:

- a. The grievance process or confidential reports utilizing the grievance box.
- b. The Colorado Department of Corrections Prison Rape Elimination Act Hotline at 800-809-2344
- c. Colorado Springs Police Department 719-444-7000
- d. ComCor, Inc. PREA Coordinator 719-473-4460 ext. 410
- e. TESSA Hotline 719-633-3819 f. Directly to any ComCor, Inc. staff member."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency.

ComCor Policy 200-13, Grievance Procedures, section D. Grievances Regarding Sexual Misconduct, 2., states, "Clients who are the victims of sexual abuse or misconduct will have access to outside victim advocates through TESSA, medical facility, or the district attorney's office. ComCor, Inc. staff will not monitor these communications."

	(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties, states, "Upon learning of any allegation, suspicion, or information that a client was sexually abused, sexually harassed, or is at risk to be sexually abused or harassed, staff will immediately: 1. Separate the alleged victim and abuser; 2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence." ComCor Policy 100-06, Communication Plan, section f. 1. i., states, "Staff are required to document all reports of sexual harassment and sexual abuse received immediately to the PREA Coordinator and to follow up with written report prior to end of shift." (d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Employees are made aware of the following through the facility PREA policy training received at orientation and annually thereafter. The PAQ states, "Initial training and annual PREA." The facility provided a ComCor Prison Rape Elimination Act PowerPoint Presentation Training. Slide 55 provides staff the following reporting options. · Call the DOC tips line at 1.877.DOC-TIPS (1.877.362.8477) · Contact ComCor PREA Coordinator 719.473.4460 ext. 410 – Jenner Behan · Notify your supervisor Through such reviews, the facility meets the standard requirements.
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115.252	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. ComCor Roberts Road Residential Treatment Facility PAQ
2. ComCor Policy 200-13, Grievance Procedures, dated 9.1.2019
3. Post Audit: Email Communication, Subject: Mid Shift Staff Checking Grievance Boxes, dated 7.6.2023

Interviews:

1. Random Residents
2. Targeted Residents
3. Quality Assurance / PREA Coordinator

Residents interviewed were aware of the grievance procedures and understood they could complete a grievance. Residents were aware of where grievance box and grievance forms were available at each location.

The Quality Assurance Coordinator stated he and one other staff checked grievance boxes once daily, Monday through Friday.

Site Observation:

Grievance boxes and grievance forms were witnessed at the Tech Stations of both facilities. One source of an allegation of the six investigations completed in the past 12 months were the source of allegations.

Post audit the facility provided an email communication from the Client Support Manager, to all staff at both facilities, Subject: Mid Shift Staff Will Be Checking Grievance Boxes @ Their Assigned Facilities, stating, "Beginning this weekend (Saturday, Sundays and all Holidays only) we will need Mid-shift staff to peek in each Grievance box located at each facility, and notate on your Facility Pass On's if you all see a form in that box. We will need this notated regardless of if there is or is not a form in that box. You all will not need a key, that being why I am simply asking that you peek in and you should be able to tell if there is a form in the box or not. On all business days, Dwight will continue to come to each facility and pick up all Grievances from those boxes." On 7.6.2023 the email was updated to include notifying two administrative staff if a grievance is found in a grievance box over the weekend through notification of the pass down system.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has an administrative procedure for dealing with resident grievances regarding sexual abuse.

ComCor Policy 200-13, Grievance Procedures, section Policy, states, "It is the policy of ComCor, Inc. to maintain a grievance procedure for clients that allows for an opportunity to resolve issues at the lowest level possible and escalate to a formal grievance if necessary. Clients may report issues regarding sexual misconduct or abuse through the grievance process or by contacting outside agencies."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.

ComCor Policy 200-13, Grievance Procedures, section E. Grievance Timelines, 2., states, "Grievances alleging sexual abuse or misconduct are not required to be submitted within 15 days."

ComCor Policy 200-13, Grievance Procedures, section B. Informal Compliant Process states, "Clients will first attempt to resolve any issues at the lowest level possible. If the client's issue involved sexual misconduct, the client is not required to utilize the informal complaint process.

1. This process may involve direct communication with the ComCor, Inc. employee in the area where the problem arose.
2. The staff member who received an informal complaint, either in writing or verbally, will consult with the client and try to resolve the issue.
3. If the issue is unable to be resolved through an informal, the client may then file a formal grievance.
4. Clients are required to demonstrate informal attempts to resolve issues prior to filing a formal grievance."

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure requires that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the

complaint.

ComCor Policy 200-13, Grievance Procedures, section C. Grievance Process, 5., states, "If a staff member is mentioned in the grievance, that staff member will not be the person who responds to the grievance."

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances filed that alleged sexual abuse was zero. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was zero.

ComCor Policy 200-13, Grievance Procedures, section E., Grievance Timeline, 4. a-b., states, "A final agency decision on the merits of any portion of a grievance alleging sexual abuse shall be made within 90 days of the initial filing of the grievance.

a. The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for the response is insufficient to make an appropriate decision.

b. The agency shall notify the resident in writing of any such extension and provide a date by which a decision will be made."

(e) The ComCor Roberts Road Residential Treatment Facility PAQ states agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of residents. Agency policy and procedure requires that if a resident decline to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline. The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident's decision to decline was zero.

ComCor Policy 200-13, Grievance Procedures, section D. Grievances Regarding Sexual Misconduct, 6., states, "ComCor, Inc. permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of residents. Agency policy and

procedure requires that if a resident decline to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline."

(f) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days. The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days was zero.

ComCor Policy 200-13, Grievance Procedures, section D., Grievances Regarding Sexual Misconduct, 4. a. 1-4, states, "Once an emergency grievance alleging a client is subject a substantial risk of imminent sexual abuse:

1. The agency shall 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.
2. An initial response shall be made in 48 hours.
3. A final agency decision shall be made within 5 calendar days.
4. The initial response and final agency decision shall document the agency's determinant whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance."

(g) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith was zero.

ComCor Policy 200-13, Grievance Procedures, section D., Grievances Regarding Sexual Misconduct, D. 5., states, "ComCor, Inc. limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency

	demonstrates that the resident filed the grievance in bad faith. Through such reviews, the facility meets the standard requirements.
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115.253	Resident access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 200-13, Grievance Procedures, dated 9.1.2019 3. ComCor Reporting Flyer in English and Spanish, not dated 4. Post Audit: Agreement for Purchase of Consulting Services, dated 2.1.2023 5. Post Audit: Victim Advocate Flyer, not dated 4.28.2023 Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Specialists 4. Specialized staff Staff and residents interviewed informally and formally were aware advocate services; however, the agency did not have an advocate outside of the Colorado Springs Police Department at the time of the onsite review. On Site Observation: The facility had posted phone numbers of the Colorado Department of Corrections for reporting and those numbers are current and in place. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility provides residents with access to outside victim advocates for emotional support

services related to sexual abuse. The facility provides residents with access to such services by giving residents mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. The facility provides residents with access to such services by enabling reasonable communication between residents and these organizations in as confidential a manner as possible.

ComCor Policy 200-13, Grievance Procedures, section D. Grievances Regarding Sexual Misconduct, 1-3, state,

1. Clients may report grievances or information regarding sexual misconduct utilizing:

- a. The grievance process or confidential reports utilizing the grievance box
- b. The Colorado Department of Corrections Prison Rape Elimination Act Hotline at 800-809-2344
- c. Colorado Springs Police Department 719-444-7000
- d. ComCor, Inc. PREA Coordinator 719-473-4460 ext. 410
- e. TESSA Hotline 719-633-3819 f. Directly to any ComCor, Inc. staff member.

2. Clients who are the victims of sexual abuse or misconduct will have access to outside victim advocates through TESSA, medical facility, or the district attorney's office. ComCor, Inc. staff will not monitor these communications.

3. Any outside agencies who receive a report of a sexual misconduct complain or grievance may contact the ComCor, Inc. at 719-473-4460 ext. 410."

On 12.5.2022 at 6:53 pm MST, this Auditor phoned the Colorado Department of Corrections Prison Rape Elimination Act Hotline at 800.809.2344. A message began, stating, "You have reached the crisis line, for all services please stay on the line for the next operator." After proper introductions and the reason for the call, the message stated, "Thank you for calling the SAFE Line. We are sorry an advocate was not able to answer your call. Please leave your name and number and an advocate will return your call." This Auditor left a message requesting a return call regarding advocate services, if this agency would report for or with the Client and how they provide Clients services who are confined a the ComCor facility." As of 1.2.2023 a return call was not returned.

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility

informs residents, prior to giving them access to outside support services, of the extent to which such communications will be monitored.

The facility provided a ComCor Reporting Flyer in English and Spanish. The flyer consists of the following information.

- Call CDOCTIPS Line 1.877.DOC.TIPS (1.877.362.8477)
- Contact Tessa Crisis Hotline 719.633.3819
- Contact PREA Officer Jenner Behan 719.473.4460 Ext. 410

Report Sexual Assault – Sexual activity between clients or clients and staff is prohibited

ComCor, Inc., does not monitor phone contact to sexual abuse reporting or advocacy agencies such as TESSA or DOC Tips Line. Contact with these agencies is confidential except when communication may invoke the State Reporting law, such as harm to self or others.

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services related to sexual abuse.

Post audit the facility provided an Agreement for Purchase of Consulting Services, the contract appears to be current and is dated 2.1.2023 and signed by the Embrave Executive Director and the contractor.

On July 5, 2023 at 3:34 pm, this Auditor phoned the advocate at 719.822.1851. A detailed message was left requesting information regarding emotional support services the contractor provides to victims of sexual abuse for the Comcor clients. On Monday, July 9, 2023 at 2:03 pm the advocate returned the call and stated she was the LCSW for Embrave, formally known as Comcor and she would provide emotional support services to clients at the Embrave program to include supporting them through a SAFE exam and ongoing services as long as the client needed.

Post audit the facility provided a victim advocate flyer with the following

	information. · Advocate name · Advocate phone number · Advocate email address · 1751 S. 8th St., Colorado Springs, CO 80905 Through such reviews, the facility meets the standard requirements.
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115.254	Third party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Reporting Flyer in English and Spanish, not dated Interviews: 1. Random Residents 2. Targeted Residents 3. Client Support Specialists 4. Supervisory staff Residents and staff interviewed demonstrated their reporting knowledge of third-party reporting stating that resident family members, friends and or legal counsel could report sexual harassment or sexual abuse allegations. Site Observation: During tours of all areas of each facility Embrace PREA flyers were posted. Flyers included contact information and instruction for third party reports.

	(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency or facility publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents. The PAQ states, "Calling or emailing the Quality Assurance Coordinator directly. Tips line also reports to Quality Assurance Coordinator." The facility provided a ComCor Reporting Flyer in English and Spanish. The flyer consists of the following information. · Call CDOCTIPS Line 1.877.DOC.TIPS (1.877.362.8477) · Contact Tessa Crisis Hotline 719.633.3819 · Contact PREA Officer Jenner Behan 719.473.4460 Ext. 410 Report Sexual Assault – Sexual activity between clients or clients and staff is prohibited. ComCor, Inc., does not monitor phone contact to sexual abuse reporting or advocacy agencies such as TESSA or DOC Tips Line. Contact with these agencies is confidential except when communication may invoke the State Reporting law, such as harm to self or others. Through such reviews, the facility meets the standard requirements.
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115.261	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews:

1. Random Residents
2. Targeted Residents
3. Client Support Specialists
4. Specialized staff

Interviews with each staff and residents interviewed demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment.

Site Observations:

In the past 12 months the facility received and investigated six allegations of sexual harassment and sexual abuse.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section C. Retaliation Monitoring, states, "ComCor, Inc. will protect all clients and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other clients or staff."

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

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section F. Confidentiality, states, "Staff will maintain the confidentiality of all allegations of sexual abuse or sexual harassment and only discuss to the extent

	necessary for an investigation, future treatment decisions, and other security and management decisions.” (c) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties, 6., states, “Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners are required to report sexual abuse pursuant to paragraph (a) of this section. Medical and mental health practitioners are required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services. (d) The agency states this provision is not applicable as they do have client’s under the age of 18. (e) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, states, “The PREA coordinator will assign a qualified and trained investigator to complete the PREA investigation. Investigations into allegations of sexual abuse and sexual harassment, shall be conducted promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. Does the agency conduct such investigations for all allegations, including third party and anonymous reports.” Through such reviews, the facility meets the standard requirements.
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115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018

	Interviews: 1. Quality Assurance / PREA Coordinator / Agency Investigator 2. Client Services Director 3. Executive Director Interviews with the Agency investigator demonstrated the facility staff act promptly and responds properly at the discovery of an incident. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse was zero. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties, 1-2, states, "Upon learning of any allegation, suspicion, or information that a client was sexually abused, sexually harassed, or is at risk to be sexually abused or harassed, staff will immediately: 1. Separate the alleged victim and abuser; 2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. a. Alleged Victim: If the abuse occurred within a time period that still allows for the collection of physical evidence, 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. 1) Allow the victim to go to the hospital for a forensic medical examination and to Ensure the victim has access to emergency timely access to emergency contraception, and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. 2) Distribute to the alleged victim the contact information for a victim advocate. The victim's advocate will be allowed to accompany the alleged victim to the forensic medical examination and investigative interviews." Through such reviews the facility meets the standard requirements.
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 3. Post Audit: Email Notification to Facility Where Abuse Occurred Interviews: 1. Executive Director The interview with the Executive Director demonstrated that he was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, he had the responsibility to notify the head of the facility where the allegation occurred. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was two. The PAQ states, "Contacted prior facilities and notified of the allegations." ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties, 4. a-d., states, "Upon receiving an allegation that a resident was sexually abused while confined at another facility: a. The head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. b. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. c. The agency shall document that it has provided such notification. d. The facility head or agency office that receives such notifications shall ensure that the allegation is investigated in accordance with these standards."

	(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard. (c) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. The PAQ states, "Confirmation emails sent to DCJ and DOC timestamp time of notification." Policy compliance can be found in provision (a) of this standard. Post audit the facility provided an email communication demonstrating a facility was notified that a client alleged sexual abuse at their facility. This email communication was made from the Quality Assurance Coordinator to an unknown receiving facility staff and administrative staff within Comcor. (d) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero. Policy compliance can be found in provision (a) of this standard. Through such reviews the facility meets the standard requirements.
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115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews:

1. Client Support Specialists
2. Specialized staff
3. Quality Assurance / PREA Coordinator

Interviews with each staff interviewed demonstrated they were aware of their first responder responsibilities. Staff stated reporting information is posted throughout the facility with reporting information and the facility PREA policy and forms could be found on a shared drive.

Site Observation:

In the past 12 months the facility received and investigated six allegations of sexual harassment and sexual abuse.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

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

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties 1-2, states, "Reporting Duties: Upon learning of any allegation, suspicion, or information that a client was sexually abused, sexually harassed, or is at risk to be sexually abused or harassed, staff will immediately:

1. Separate the alleged victim and abuser;
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
 - a. Alleged Victim: If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.
 - 1) Allow the victim to go to the hospital for a forensic medical examination and to Ensure the victim has access to emergency timely access to emergency contraception, and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
 - 2) Distribute to the alleged victim the contact information for a victim advocate. The victim's advocate will be allowed to accompany the alleged victim to the forensic medical examination and investigative interviews.
 - b. Alleged Abuser: If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.
 - c. Identify and separate any witnesses.
 - d. Call Colorado Springs Police Department or 911 if the situation warrants. Notify supervisor or on call if after business hours."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility's policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties, 1., states, "If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not

	to take any actions that could destroy physical evidence and then notify security staff.” Through such reviews, the facility meets the standard requirements.
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115.265	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews: 1. Client Support Specialists 2. Client Services Director 3. Quality Assurance / PREA Coordinator Interviews with the random and specialized staff demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to sexual abuse and sexual harassment incidents. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties 1-2, states, “Reporting Duties: Upon learning of any allegation, suspicion, or information that a client was sexually abused, sexually harassed, or is at risk to be sexually abused or harassed, staff will immediately: 1. Separate the alleged victim and abuser;

	2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. a. Alleged Victim: If the abuse occurred within a time period that still allows for the collection of physical evidence, 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. 1) Allow the victim to go to the hospital for a forensic medical examination and to Ensure the victim has access to emergency timely access to emergency contraception, and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. 2) Distribute to the alleged victim the contact information for a victim advocate. The victim's advocate will be allowed to accompany the alleged victim to the forensic medical examination and investigative interviews. b. Alleged Abuser: If the abuse occurred within a time period that still allows for the collection of physical evidence, 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. c. Identify and separate any witnesses. d. Call Colorado Springs Police Department or 911 if the situation warrants. Notify supervisor or on call if after business hours." ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, states, "The PREA coordinator will assign a qualified and trained investigator to complete the PREA investigation." ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Sexual Abuse Incident Review, states, "The PREA investigator will conduct a Sexual Abuse Incident Review within 30 days of the conclusion of the investigation. The review committee will be multi-disciplinary and include line level staff and management." Through such reviews, the facility meets the standard requirements.
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115.266	Preservation of ability to protect residents from contact with abusers
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ Interviews: 1. Executive Director An interview with the Executive Director demonstrated the agency is not responsible for collective bargaining. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later. Through such reviews, the facility meets the standard requirements.

115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 3. Retaliation Monitoring Form, not dated Interviews: 1. Quality Assurance / PREA Coordinator

The interview with the Quality Assurance / PREA Coordinator demonstrated he would complete retaliation monitoring for the facility, whether the victim be a resident or employee. The Quality Assurance / PREA Coordinator stated he would check in and document retaliation monitoring once a week for at least 90 days and or as long as was necessary and document those notes on the facility Retaliation Monitoring Form.

Site Observation:

Both of the sexual abuse investigations demonstrated retaliation monitoring had been completed.

(a-b/d-e) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency designates the Client Services Director and the Quality Assurance Coordinator with monitoring for possible retaliation.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section C. Retaliation Monitoring, 1-2., states, "ComCor, Inc. will protect all clients and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other clients or staff.

1. In situations involving client claims, the facility director or designee will monitor the conduct and treatment of residents in who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by clients or staff.

2. In situations involving staff and client claims, the PREA coordinator will monitor the conduct and treatment of residents in who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by clients or staff.

3. The assigned monitor will conduct periodic status checks and review any resident disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. All retaliation monitoring documentation will be forward for record keeping to the PREA coordinator."

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to ascertain if

there are any changes that may suggest possible retaliation by residents or staff. The facility will monitor conduct or treatment until the resident is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had zero incidents of retaliation.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section C. Retaliation Monitoring, 4-5., state,

4. "The assigned retaliation monitor will act promptly to remedy any such retaliation which may include utilization of the client or staff disciplinary process.

5. The assigned retaliation monitor will continue such monitoring for a minimum of 90 day and beyond if the initial monitoring indicates a continuing need."

The facility provided a Retaliation Monitoring Form. The form documents the following information.

- Victim / Witness Name / ID / Unit
- Facility / Date of PREA Violation / Date Violation Reported
- Retaliation Monitor Name / Title
- Behaviors Monitored:
 - o Resident disciplinary reports / COPD charges
 - o Housing changes needed
 - o Program Changes needed
 - o Work assignment changes needed
 - o Grievance filed
 - o Earned time changes
 - o Classification changes
 - o Negative behavior evaluations
 - o Was staff reassigned based on incident?
 - o Did staff involved receive any negative performance reviews since incident?
 - o Comments
- Within 3 days

	· Within 15 days · Within in 45 days · Within 60 days · Within 75 days · Within 90 days Through such reviews, the facility meets the standard requirements.
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115.271	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews: 1. Quality Assurance / PREA Coordinator / Agency Investigator The Agency Investigator clearly articulated processes required during an investigation, to include a thorough review and in-depth documentation process. Site Observation: In the past 12 months the facility received and investigated six allegations of sexual harassment and sexual abuse. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency/ facility has a policy related to criminal and administrative agency investigations. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation,

section B. Investigation, 2., states, “When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

(b) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, states, “The PREA coordinator will assign a qualified and trained investigator to complete the PREA investigation.”

(c) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 4. Administrative Investigations, b., states, “Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.”

(b) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 2., states, “When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

(c) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 3. c.-d., state,

c. “The investigator will not require a client who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

d. The investigator will ensure the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not be determined by the person’s status as client or staff.”

(g) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigations, 2., states, “Referral for Investigation by the Colorado Springs Police Department: The assigned PREA investigator in coordination with the PREA coordinator and vice president of operations will determine if the allegation should be reported to the Colorado Springs Police Department for investigation as a criminal offense.

	a. The administrative investigation will be suspended until the Colorado Springs Police Department has made a determination on whether the incident will be referred for criminal charges. b. Once a determination has been made the assigned investigator will document that decision in the internal report and proceed with the administrative investigation.” (h) The ComCor Roberts Road Residential Treatment Facility PAQ states substantiated allegations of conduct that appear to be criminal are referred for prosecution. The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit, was zero. Policy compliance can be found in provision (g) of this standard. (i) The ComCor Roberts Road Residential Treatment Facility PAQ states substantiated the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Data Collection and Annual Report, states, “The PREA coordinator will collect annual data including reports, investigative files, and Sexual Abuse Incident Review documentation for all allegations of sexual abuse or sexual harassment in ComCor facilities annually. The PREA coordinator will retain these records for 10 years.” (j) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, e., states, “The departure from employment of the alleged abuser does not provide a basis to terminate the investigation.” Through such reviews, the facility meets the standard requirements.
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115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

	1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews: 1. Quality Assurance / PREA Coordinator / Agency Investigator The interview with Agency Investigator demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (a) The ComCor Roberts Road Residential Treatment Facility PAQ Bureau states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 3. Administrative Investigations, B. Investigation, d., states, "The investigator will impose a standard of evidence no higher than a preponderance of the evidence in determining if sexual abuse or sexual harassment are substantiated. The report findings will either be determined as: 1) Unfounded: A determination of unfounded means an allegation that was investigated and determined not to have occurred. 2) Unsubstantiated: A determination of unsubstantiated means an allegation that was investigated, and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred. 3) Substantiated: A determination of substantiated means an allegation that was investigated and determined to have occurred." Through such reviews, the facility meets the standard requirements.
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115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

1. ComCor Roberts Road Residential Treatment Facility PAQ
2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018
3. Post Audit: PREA Post Investigation Client Notification, not dated

Interviews:

1. Quality Assurance / PREA Coordinator

Interviews with a Quality Assurance / PREA Coordinator demonstrated he would personally verbally inform the resident of the outcome of an investigation. The Quality Assurance / PREA Coordinator would also document the verbal notification within the facility investigation documentation.

Post audit the facility provided a PREA Post Investigation Client Notification form to document findings of investigations, sanctions imposed, staff or suspects removed from the facility, suspects separated from the victim, staff no longer employed, staff or client indicted and staff or client convicted.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged resident sexual abuse that were completed by the agency/facility in the past 12 months was 12.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. 4. Investigation Results, states, "At the conclusion of the investigation into a client's allegation of sexual abuse suffered in ComCor, Inc. the investigator will inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded."

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation. The number of investigations of alleged resident sexual abuse in the

facility that were completed by an outside agency in the past 12 months was zero.

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

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. 4. Investigation Results, a. Investigations Regarding Staff, states, "Investigations Regarding Staff: If the investigation determination was substantiated or unsubstantiated, the investigator will also inform the client:

- 1) The staff member is no longer posted within the client's unit;
- 2) The staff member is no longer employed at the facility;
- 3) If the investigator learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- 4) If the investigator learns that the staff member has been convicted on a charge related to sexual abuse within the facility."

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

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. 4. Investigation Results, b. Investigations Regarding Other Clients, states, "Following a client's allegation that he or she has been sexually abused by another resident, the assigned investigator will subsequently inform the alleged victim whenever:

- 1) The investigator learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or

	2) All such notifications or attempted notifications will be documented in the alleged victim's client placement. 3) The investigator is not required to inform the victim once they have left the supervision of ComCor, Inc." (e) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency has a policy that all notifications to residents described under this standard are documented. Practice compliance can be found in provision (d) of this standard. Through such reviews, the facility meets the standard requirements.
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115.276	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-05, Code of Conduct, dated 5.1.2020 Interviews: 1. Clinical Services Director The interview with the Clinical Services Director demonstrated there were zero staff who were disciplined for violation of an agency sexual abuse or sexual harassment policy. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. ComCor Policy 100-05, Code of Conduct, section F. Violations, 1.-3., states, "Staff members and volunteers, who violate these practices, may be subject to disciplinary action including immediate discharge and/or legal action by ComCor.

1. Documentation of unethical relationships between staff members and clients may be maintained in the personnel files.
2. Any staff who witness or are aware of any attempt to violate these relationship/communication guidelines will immediately report the information to the program manager or vice president of operations.
3. Pursuant to the Prison Rape Elimination Act, claims of sexual abuse or misconduct will be referred to local law enforcement for investigation.”

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies.

ComCor Policy 100-05, Code of Conduct, section F. 4., states, “Substantiated cases of sexual abuse by staff shall result in disciplinary termination.”

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment.

ComCor Policy 100-05, Code of Conduct, section F. Violations, 4., states, “The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.”

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment.

	ComCor Policy 100-05, Code of Conduct, section F. Violations, 3., states, "Pursuant to the Prison Rape Elimination Act, claims of sexual abuse or misconduct will be referred to local law enforcement for investigation, and to any relevant licensing bodies." Through such reviews, the facility meets the standard requirements.
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115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews: 1. Clinical Services Director The interview with the Clinical Services Director demonstrated there were zero volunteers or contractors who were disciplined for violation of an agency sexual abuse or sexual harassment policy. Site Observation: During the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, contractors or volunteers have not been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of

	residents. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of residents was zero. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 4. Administrative Investigation, h., states, "Any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. This report will be held for as long as the alleged abuser is incarcerated or employed plus a period of 5 years." (b) The ComCor Roberts Road Residential Treatment Facility PAQ the facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. Policy compliance can be found in provision (a) of this standard. Through such reviews, the facility meets the standard requirements.
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115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 3. ComCor Prison Rape Elimination Act PowerPoint Training, not dated 4. ComCor Conditions of ComCor, Inc., Placement Class 1, dated 7.1.2022 Interviews: 1. Clinical Services Director An interview with the Clinical Services Director demonstrated residents who falsely

reported PREA allegations would typically receive a resident incident report, which would regress them in the program to a lower phase or unsuccessfully discharge them.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months, the number of administrative findings of resident-on-resident sexual abuse that have occurred at the facility was zero. In the past 12 months, the number of criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the facility was zero.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 4. Administrative Investigation, j., states, "Residents shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for residenton-resident sexual abuse."

(b) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 4. Administrative Investigation, k., states, "Sanctions shall 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."

(c) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 4. Administrative Investigation, i., states, "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."

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending resident to participate in such interventions as a condition of access to programming or other benefits.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. 4. e. Mental Health Evaluation for Abusers, states, "The investigator will arrange for a mental health evaluation for all known client on client abusers within 60 days and offer treatment when appropriate."

(e) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency does not discipline residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact. The PAQ states, "Referred to law enforcement."

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

The facility provided a ComCor Prison Rape Elimination Act PowerPoint Training. Slide 27 states the following. "

"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.

- What does your policy state regarding disciplinary sanctions for clients who make false allegations?
- The challenge is maintaining a reporting culture by not punishing those who are making reports in good faith."

(g) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency prohibits all sexual activity between residents. If the agency prohibits all sexual activity between residents and disciplines residents for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

The facility provided a ComCor Conditions of ComCor, Inc., Placement Class 1. Condition #104 Appropriate Sexual Behavior, states,

	“Condition of Placement: Individuals placed in ComCor will demonstrate sexual behavior that conforms to the requirements of the Prison Rape Elimination Act and Community Confinement Standards. Clients will report any instances of inappropriate sexual behavior to the appropriate authorities. Violation – Sexual Misconduct: Participating, or attempting to participate in, sexual conduct of any type with other ComCor clients or between clients and staff members regardless of whether such conduct is perceived as consensual and regardless of the location. This conduct includes: · The use of physical force or intimidation for the purposes of sexual contact of any kind. (or) · Contact between the mouth, penis, breast, buttocks, vulva, anus or any body part with the intent to abuse, arouse, stimulate or gratify sexual desire. Contact can be with or without clothing being worn by one or both parties. (or) · The threat of physical force or pressure for sexual acts or requests for sexual acts. (or) · Sexual harassment. (or) · Masturbation in the view of other ComCor clients or staff. (or) · Indecent exposure.” Through such reviews, the facility meets the standard requirements.
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115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews:

1. Clinical Manager

Interviews with the Clinical Manager demonstrated she would immediately provide emergency medical or mental health services or as soon as possible if she was not at the facility when the allegation was received.

Site Observation:

A review of resident files demonstrated one targeted resident received emergency services on the day of reporting an allegation of sexual abuse.

(a) The ComCor Roberts Road Residential Treatment Facility PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section A. Reporting Duties, a. 1), states, "Allow the victim to go to the hospital for a forensic medical examination and to Ensure the victim has access to emergency timely access to emergency contraception, and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate."

(b) The ComCor Roberts Road Residential Treatment Facility states, "Clients would be taken to the local hospital for care."

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

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states, treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

	ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 5. Investigation Results, d. Ongoing Access to Medical and Mental Health Services, states, “The assigned investigator will ensure the victim has access to medical and mental health services including access if transferred to another facility or released from ComCor, Inc. custody. This included access to pregnancy test and info on lawful medical services and testing for sexually transmitted infections. These 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.” Through such reviews, the facility meets the standard requirements.
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115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 Interviews: 1. Clinical Manager Interviews with the Clinical Manager demonstrated she would ensure a continuum of services were provided upon request from a physician or advocate services. (a-b) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The PAQ states, “Our clinical department will see any client who needs this treatment Monday through Friday.”

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. 4. d.-e., state,

d. "Ongoing Access to Medical and Mental Health Services: The assigned investigator will ensure the victim has access to medical and mental health services including access if transferred to another facility or released from ComCor, Inc. custody. This included access to pregnancy test and info on lawful medical services and testing for sexually transmitted infections.

e. Mental Health Evaluation for Abusers: The investigator will arrange for a mental health evaluation for all known client on client abusers within 60 days and offer treatment when appropriate."

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. Policy compliance can be found in provision (a) of this standard.

(e) The ComCor Roberts Road Residential Treatment Facility PAQ states if pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. Policy compliance can be found in provision (d) of this standard.

(f) The ComCor Roberts Road Residential Treatment Facility PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Policy compliance can be found in provision (d) of this standard.

(g) ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section B. Investigation, 5. Investigation Results, d. Ongoing Access to Medical and Mental Health Services, states, "The assigned investigator will ensure the victim has access to medical and mental health services including access if transferred to another facility or released from ComCor, Inc. custody. This included access to pregnancy test and info on lawful medical services and testing for sexually transmitted infections. These 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."

(h) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility does attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers

	treatment when deemed appropriate by mental health practitioners. Policy compliance can be found in provision (a) of this standard. Through such reviews, the facility meets the standard requirements.
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115.286	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 3. Post Audit: Sexual Abuse Incident Review Form, not dated Interviews: 1. Quality Assurance / PREA Coordinator 2. Executive Director The team on-site clearly articulated their review of all incidents reported and investigations of sexual harassment and sexual abuse. The team considers demographics of residents, facility area where abuse is alleged to have taken place, staffing patterns and technology when reviewing incidents of sexual harassment or sexual abuse. (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been eight criminal and or administrative investigations of alleged sexual abuse completed at the facility, ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Sexual Abuse Incident Review, states, “The PREA investigator will conduct

a Sexual Abuse Incident Review within 30 days of the conclusion of the investigation. The review committee will be multi-disciplinary and include line level staff and management.”

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents were one. Policy compliance can be found in provision (a) of this standard.

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. Policy compliance can be found in provision (a) of this standard.

(d) The ComCor Roberts Road Residential Treatment Facility PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and the PREA Coordinator.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Sexual Abuse Incident Review, 1. a-e., states, “The review committee will:

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

b. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;

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

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

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

Post audit the facility implemented a Sexual Abuse Incident Review Form. The form documents the following:

- Facility / Investigation /Incident Report #
- Date of Allegation: / Date investigation Completed: / Date of SAIR
- Alleged Victim / Alleged Perpetrator
- Victim inmate/detainee/resident ID#
- Alleged perpetrator was: Staff/Volunteer/Contractor/Client
- Incident outcome
- The review team has considered whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- The review team has considered whether the incident or allegation was motivated by race; ethnicity; gender identity; LGBTI identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
- The review team has examined the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may have enabled abuse.
- The review team has assessed the adequacy of staffing levels in that area during different shifts.
- The review team has assessed whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- Attending staff members from each of the below listed areas, including other relevant staff
- Are there recommendations for improvement?
- Facility Head review of report and recommendations for improvement.
- If any recommendations are approved, which ones and what is the deadline for improvement to be made/implemented? A corrective action plan (CAP) must be completed by the PCM or designee for all recommended changes or improvements and must accompany this form.
- If recommendations were not approved, which ones and describe the reason why not: (Corrective action plan can be attached if recommendations are approved or partially approved to track completion.)

	(c) The ComCor Roberts Road Residential Treatment Facility PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. 2-3, state, 2. “The PREA coordinator will prepare a report of the committee’s findings, including but not necessarily limited to determinations made pursuant of this section, and any recommendations for improvement, and submit such report to the vice president of operations. 3. The facility will implement the recommendations for improvement or will document reasons for not doing so.” Through such reviews, the facility meets the standard requirements.
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115.287	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 3. Post Audit: Memorandum, Subject: PREA SSV Memo, dated 6.21.2023 (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Data Collection and Annual Report, 1., states, “The PREA coordinator will collect annual data including reports, investigative files, and Sexual Abuse Incident

Review documentation for all allegations of sexual abuse or sexual harassment in ComCor facilities annually. The PREA coordinator will retain these records for 10 years.”

(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency aggregates the incident-based sexual abuse at least annually.

ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Data Collection and Annual Report, 2., states, “The PREA coordinator will prepare an annual report that identifies problem areas and plans for corrective action. The report will compare current year data to previous year’s data and make this report public through the website. The PREA auditor and ComCor, Inc. staff will jointly develop a corrective action plan, if necessary, and fully implement.”

(c) The ComCor Roberts Road Residential Treatment Facility PAQ states the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

Post audit the facility provided a memorandum from the Executive Director, to administration, Subject: PREA SSV Memo, stating, “I wanted to let you know that effective immediately, Embrave will utilize the Survey of Sexual Violence for administrative and criminal allegations of sexual abuse. The most current version can be found at Survey of Sexual Victimization, 2019 - State Prison Systems Summary Form (ojp.gov). Please let me know if you have any questions.”

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

(e) This provision is not applicable as the ComCor Roberts Road Residential Treatment Facility does not have private facilities.

(f) This provision is not applicable as the DOJ has not requested agency data.

	Through such reviews, the facility meets the standard requirements.
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115.288	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. 2021 ComCor, Inc. Prison Rape Elimination Act Annual Report (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency reviews data collected and aggregated pursuant to §115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. The facility provided a 2021 ComCor, Inc. Prison Rape Elimination Act Annual Report. The Annual Report is comprised of the following elements. · Background · ComCor, Inc.'s Zero Tolerance Policy · ComCor, Inc.'s Approach · 2021 PREA Annual Report Data · Definitions · Sexual Abuse Report Activity · Prison Rape Elimination Act Annual Report June 2020 – July 2021 · 2022 Goals The Annual Report is signed by the agency Quality Assurance Coordinator and the Executive Director.

	(b) The ComCor Roberts Road Residential Treatment Facility PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse. Policy and practice compliance can be found in provision (a) of this standard. (b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency makes its annual report readily available to the public, at least annually, through its website at 2021-ComCor-PREA-Annual-summary.pdf. Annual reports are approved by the agency head. (d) The ComCor Roberts Road Residential Treatment Facility PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. Through such reviews, the facility meets the standard requirements.
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115.289	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. ComCor Roberts Road Residential Treatment Facility PAQ 2. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, dated 12.31.2018 (a) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency ensures that incident-based and aggregate data are securely retained. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Data Collection and Annual Report, 1., states, "The PREA coordinator will collect annual data including reports, investigative files, and Sexual Abuse Incident Review documentation for all allegations of sexual abuse or sexual harassment in ComCor facilities annually. The PREA coordinator will retain these records for 10

	years.” (b) The ComCor Roberts Road Residential Treatment Facility PAQ states the agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public by posting on their website. ComCor Policy 100-13, Prison Rape Elimination Act Response and Investigation, section D. Data Collection and Annual Report, 2., states, “The PREA coordinator will prepare an annual report that identifies problem areas and plans for corrective action. The report will compare current year data to previous year’s data and make this report public through the website. The PREA auditor and ComCor, Inc. staff will jointly develop a corrective action plan, if necessary, and fully implement.” (c) The ComCor Roberts Road Residential Treatment Facility PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. Through such reviews, the facility meets the standard requirements.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard Auditor Discussion (a) This standard is not applicable as the facility is a standalone facility and not part of an agency of facilities. (b) This is the second audit cycle for ComCor Roberts Road Residential Treatment Facility and the first year of the fourth audit cycle. (h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.

	(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information). (m) The Auditor was permitted to conduct private interviews with residents. (n) Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel. Through such reviews, the facility meets the standard requirements.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(b) The agency did not complete an audit report during their first audit cycle. Through such reviews, the facility meets the standard requirements.

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

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	yes
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	yes
115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enable residents to shower,	yes

	perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes

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

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of	yes

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

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

	agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

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

115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	yes
115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes

	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent	yes

	the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by	yes

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes
115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes

	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.242	Use of screening information	

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

	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve	yes

	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

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

	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.)	
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes
115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

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

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate,	yes

	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?	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes

	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

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

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

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

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

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

	condition of access to programming and other benefits?	
115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	yes

	information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287	Data collection	

(c)		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the	yes

	same manner as if they were communicating with legal counsel?	
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