

PREA Facility Audit Report: Final

Name of Facility: CenterPoint Recovery Center for Men

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/01/2021

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: William J BENJAMIN	Date of Signature: 08/01/2021

AUDITOR INFORMATION	
Auditor name:	Benjamin, William
Email:	wbenjami@aol.com
Start Date of On-Site Audit:	06/22/2021
End Date of On-Site Audit:	06/23/2021

FACILITY INFORMATION	
Facility name:	CenterPoint Recovery Center for Men
Facility physical address:	530 County Park Road, Paducah, Kentucky - 42001
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Max Grantham
Email Address:	mgrantham@4rbh.org
Telephone Number:	270-444-3640 ext 286

Facility Director	
Name:	Max Grantham
Email Address:	mgrantham@4rbh.org
Telephone Number:	270-444-3640 x 2864

Facility PREA Compliance Manager	
Name:	Thelma Hunter
Email Address:	thunter@4rbh.org
Telephone Number:	O: (270) 444-3640

Facility Characteristics	
Designed facility capacity:	125
Current population of facility:	95
Average daily population for the past 12 months:	94
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	19 - 62
Facility security levels/resident custody levels:	Community
Number of staff currently employed at the facility who may have contact with residents:	28
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	0
Number of volunteers who have contact with residents, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	Four Rivers Behavioral Health
Governing authority or parent agency (if applicable):	
Physical Address:	425 Broadway, Paducah, Kentucky - 42001
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Max Grantham	Email Address:	mgrantham@4rbh.org

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

PHASE ONE: PRE-ON-SITE

Audit Planning and Logistics

On March 5, 2021, Four Rivers Behavioral Health contracted with William Benjamin, DOJ certified PREA Auditor, from Benjamin Correctional Consulting, LLC, to conduct the Prison Rape Elimination Act (PREA) on-site audit of the CenterPoint Recovery Center for Men starting on June 22, 2021 and ending on June 23, 2021. The CenterPoint Recovery Center for Men is a 125-bed, six-month, residential drug treatment center and is just one of Four Rivers Behavioral Health's many programs for the treatment of substance use disorders. The CenterPoint program utilizes the 12-steps of Alcoholics Anonymous along with Recovery Dynamics, which is a program of study focusing on the physical and mental aspects of addiction, to treat clients in a long-term residential setting. Participants average length of stay is up to 180 Days. The facility currently has 95 male residents of ages 19 - 62 years old. The facility employs 28 full-time staff.

The scope of the audit was to conduct a PREA audit of the facility's compliance with the Community Confinement Facility Standard Sections 115.211-115.403 using the PREA Audit Methodology required by the PREA Audit Handbook. During the course of the audit, the Auditor conducted the documentation review, informal interviews with randomly-selected staff and residents, formal interviews with randomly-selected staff and specialized staff, and authored this report. The contract stated that during the course of the PREA audit, the Auditor will have unrestricted access to all areas of the facility, staff, residents, facility records, and official reports.

Kick-off meeting

On March 25, 2021, a kick-off phone call was held with Thelma Hunter, Division Director, Four Rivers Behavioral Health and Max Grantham, Site Administrator/PREA Coordinator. The purpose of the meeting was to brief CenterPoint Recovery Center for Men on the PREA audit process, discuss the logistics and planning for the on-site audit, the Auditor's requirement of the use of the Online Audit System (OAS) for the audit, and the submission due date of June 1, 2021 for the Pre-Audit Questionnaire (PAQ). Also discussed was the date of May 7, 2021 for the Audit Notice to be posted at the facility and instructions for the posting and resident mail access. Several follow-up virtual meetings occurred throughout the Pre-Audit phase to answer audit questions and provide technical assistance with the Online Audit System.

Audit Notice instructions

On May 7, 2021, 45 days prior to the actual on-site portion of the audit, a notification was posted by the facility in all living areas, common areas, education areas, administrative areas, program areas, and medical areas of the CenterPoint Recovery Center for Men announcing the upcoming PREA audit along with the Auditor's contact information. The instructions provided to the facility were as follows:

Please see the attached audit notices in English and Spanish. Please give special attention to the following when posting these PREA Audit Notices:

These notices are required to be abundantly posted at least 6 weeks in advance of the on-site audit, which means they must be posted on or before Friday, May 7, 2021.

The instructions about how these notices are to be posted are as follows:

1. Post the English and Spanish postings side-by-side on brightly colored paper so they are visible among other postings. You will want to enter into the attached word documents the actual date of the posting (top left side of document).
2. They should be posted abundantly and be visible to residents, staff, and visitors. Posting areas, at a minimum, should include: every living unit, student common areas, facility entrances and visitation areas (including where attorneys visit), medical and mental health, cafeteria, staff break rooms, mail room, intake and/or booking, and program areas.
3. We will need confirmation of the postings in the form of time and date stamped photos of the postings with a description of the location. Please include photos of the different areas in which they are posted including all inmate living areas, facility entrance, visitation, and attorney visiting area.
4. The postings shall remain in place at least 6 weeks after the onsite audit review has been completed.
5. Please contact me with any questions, thanks.

The Audit Notice:

NOTICE OF PRISON RAPE ELIMINATION ACT (PREA) AUDIT

The CenterPoint Recovery Center for Men will be undergoing an audit for compliance with the United States Department of Justice's National PREA Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) for Prisons and Jail standards during the following period:

June 22-23, 2021, any person with information relevant to this compliance audit may confidentially* correspond with the Auditor via the following address:

Mr. William Benjamin
P.O. Box 1184
Versailles, Kentucky 40383

*CONFIDENTIALITY – All written and verbal correspondence and disclosures provided to the designated Auditor is confidential and will not be disclosed unless required by law. There are exceptions when confidentiality must be legally breached. Exceptions include, but are not limited to the following:

if the person is an immediate danger to her/himself or others (e.g. suicide or homicide); allegations of suspected child abuse, neglect or maltreatment; in legal proceedings where information has been subpoenaed by a court of appropriate jurisdiction.

The facility's Site Administrator/PREA Coordinator provided date stamped digital photos of all of the audit notice postings placement on the morning of May 7th. This ensured that the CenterPoint Recovery Center for Men's staff, residents, and visitors had the information and opportunity to contact the Auditor.

The notices were verified to be in those locations during the on-site portion of the audit.

While on site, the Auditor observed the audit notification in various locations throughout the facility, including all resident living units, programming and work areas, visiting room, and staff access areas.

The Auditor did not receive any correspondence prior to the date of the on-site audit, nor were any received while on-site or following the audit, up to the date of this report.

Pre-Audit Phase

On May 6, 2021, the Site Administrator/PREA Coordinator provided a completed Pre-Audit Questionnaire (PAQ) and other supporting documents, via the PREA Resource Center's Online Audit System (OAS), allowing for a full review before the on-site portion of the audit. These documents were reviewed by the Auditor and communication with the Site Administrator/PREA Coordinator allowed for clarification as needed, prior to the on-site portion of the audit. The provided documents contained all relevant information pertaining to the PREA standards and the audit. This included, but was not limited to, the PAQ, relevant agency policies, facility procedures, memorandums of understanding and contracts, PREA posters, brochures and handbooks, compliance memorandums for each standard, and training documentation.

Prior to the on-site review, the Auditor reviewed all submitted documentation and exchanged numerous emails with the Site Administrator/PREA Coordinator related to follow-up questions regarding the submitted documentation. An issue log was developed and provided to the facility requesting clarification of policies and procedures, additional information, and supporting documents. The Auditor also reviewed CenterPoint's PREA Audit Reports from their last two PREA audits, the Four Rivers Behavioral Health's and the CenterPoint Recovery Center for Men's public websites and related PREA information, and the CenterPoint Recovery Center for Men's Annual PREA Report.

Also, prior to the on-site portion of the audit, the Auditor conducted several phone meetings with the Site Administrator/PREA Coordinator. A daily audit schedule was provided to the facility and interviews with key staff were prescheduled.

Correspondence Received

No correspondence was received from residents, employees, or other non-facility persons.

Outreach to Advocacy Organizations and General Search

The Auditor contacted Just Detention International (JDI) which provides sexual abuse advocacy and tracking services via e-mail to inquire if the organization had any information of concern regarding the CenterPoint Recovery Center for Men. JDI reported that they had received no correspondence regarding the CenterPoint Recovery Center for Men and they had not been contacted by any CenterPoint Recovery Center for Men resident in the past 12 months or at any other time prior. They also stated that, if contacted by any resident from CenterPoint Recovery Center for Men, they would provide a survivor package containing resources to various local agencies and services. The Auditor also conducted a web and social media search for any other information about the CenterPoint Recovery Center for Men. The search revealed no information relevant to this audit.

PHASE TWO: ON-SITE AUDIT

On the morning of June 22, 2021, the Auditor arrived at the CenterPoint Recovery Center for Men and began the on-site portion of the audit. Upon entry in the facility, the Auditor was processed in the front security building (which is located adjacent to the main entrance to the facility and outside of the secure perimeter). He was COVID-19 screened and the Auditor's identification was verified. He was directed to review and sign the CenterPoint Recovery Center for Men's PREA zero-tolerance policy and training information regarding sexual abuse and sexual harassment. After his clearance, the Auditor was escorted to the Administrative area to begin the initial entrance interview meeting. The meeting was attended by members of the Facility's Executive Team. This included:

Thelma Hunter, Division Director, Four Rivers Behavioral Health

Max Grantham, Site Administrator/PREA Coordinator

After the entrance interview meeting, the Auditor was provided with a work space in the administrative area and given rosters of all staff available at the facility for the two days of the audit, indicating post and shift hours. In addition, rosters were received indicating which individuals filled each specialized staff position. A roster was received detailing all residents housed at the facility as of the first day of the audit along with rosters of all specialized categories of residents. These were used to select the staff and residents to participate in the random and specialized interviews.

Facility Site Review

Shortly after the Auditor reviewed the provided on-site documents and rosters, he started the comprehensive facility site review. A two (2) hour facility site review was led by the Site Administrator/PREA Coordinator and the Division Director. The Auditor conducted a review of the entire facility which included the administration areas, the main lobby area (Center Monitoring Office), community kitchen, pantry, dining hall, lounge, meditation chapel, laundry rooms, peer mentor office, meeting rooms, conference room, the Safe off the Street (SOS) Intake Dorm, Motivational Tract (MT) Dorm, resident and staff bathrooms, property room, medical offices/exam area, resident visitation area, hallways and common areas, resident living units and rooms and their adjoining multipurpose areas, storage garage, all outside grounds, and outdoor exercise area.

The total resident population on the first day of the on-site audit was 95 residents housed in (5) living units: SOS Dorm (10 residents), MT Dorm (16 residents), 1st Floor Rooms (28 residents), 2nd Floor Rooms (38 residents), and C Dorm (3 residents).

While conducting the facility site review, the Auditor paid particular attention to staffing/resident ratios, staff/resident interactions, supervision of residents, camera and furniture placement, lines of sight/blind stops, privacy for residents in specified areas, PREA education/reporting/victim advocacy and audit notification posters, access to grievance forms, door and physical security, resident movement, intake/receiving process, and phone/visitation access. The Auditor toured and thoroughly examined all areas of the facility and all areas accessed by the residents. This included informal discussions with residents and the successful testing of the resident phone reporting system.

The Auditor also conducted informational discussions with staff and residents encountered while touring. The Auditor was able to observe cross gender announcements being made by staff. In addition, all staff encounters were extremely professional, friendly and helpful. The Auditor observed positive and productive interactions between staff and residents that exhibited a respectful working and living environment. Staff were observed monitoring residents and conducting quality security checks in work, program, and living areas.

During the facility site review, the Auditor observed some areas of concern. The PC were advised of these issues and some were corrected while the on-site portion of the audit was being conducted, the following deficiencies and recommendations were identified during the site review:

Laundry Rooms: The Auditor noted a supervision concern regarding the lighting in the resident access laundry rooms. These rooms, located on the 1st and 2nd floor wings are large and without natural light and depends upon artificial light with resident-controlled wall switches. The Auditor recommended the facility replace the wall light switches with motion activated wall switches to increase the supervision in the laundry room. This recommendation was accepted by the facility and it was immediately corrected by the facility's maintenance staff. Motion sensor light switches were procured and installed. This recommendation was verified by the Auditor via photographic proof on July 1, 2021. This issue is now deemed closed.

PREA Information Poster: The Auditor noted that the PREA information posters for the living units were not placed in the best location. The PREA information posters were technically outside the living units in the stairway landings and not directly within the resident living unit's common areas. The Auditor recommended that they be relocated inside the living unit's common area and near the phone bank. This recommendation was accepted by the facility and it was immediately corrected by the facility's maintenance staff. Plexiglas-framed PREA information posters were reinstalled in the common areas of the living units, near the phone banks. This recommendation was verified by the Auditor while on site on June 23, 2021. This issue is now deemed closed.

On-Site Interviews

Following the facility site review tour, interviews began with specialized staff, randomly-selected staff, and residents. During this on-site

portion of the audit, a total 28 staff were employed at the facility and a total of 21 staff interviews were conducted with staff covering all three shifts, 12 of which were randomly-selected staff and 9 were specialized staff, some who are responsible for more than one protocol. A total of 16 interviews were conducted with residents, 12 of which were randomly-selected and 4 were targeted residents. The staff and residents interviewed were selected to ensure a representation from all shifts, all housing units, and different programming and operational areas of the facility. Since no correspondence was received prior to or during the audit, no additional interviews were conducted with staff or residents.

Interview protocols conducted were as follows:

Randomly-selected Staff – 12
Agency Head/Designee – 1
Program Director – 1
Agency PREA Coordinator – 1
Facility PREA Compliance Manager – 0
Intermediate or higher-level Supervisors – 1
Medical Staff -1
Mental Health Staff – 1
Human Resources Staff – 1
Investigative Staff – 2
Staff who preform risk screening – 1
Staff who monitor retaliation – 1
Incident Review Team Members – 1
Intake Staff – 1
First Responders – 1

The total number of residents housed at CenterPoint Recovery Center for Men on the first day of the on-site review was 95. A total of 16 resident interviews were conducted:

Randomly-selected residents – 12
Targeted selected Resident - 4
Physically disabled, blind, deaf, and/or hard of hearing residents – 1 (one resident housed at CenterPoint Recovery Center for Men matched this criteria)
Cognitively disabled residents – 1 (one resident housed at CenterPoint Recovery Center for Men matched this criteria)
Limited English Proficient (LEP) residents – 0 (No residents housed at CenterPoint Recovery Center for Men matched this criteria)
Gay, lesbian, and/or bisexual residents – 0 (No residents housed at CenterPoint Recovery Center for Men matched this criteria)
Transgender or intersex residents - 0 (No residents housed at CenterPoint Recovery Center for Men matched this criteria)
Residents in segregation for risk of victimization - 0 (No residents housed at CenterPoint Recovery Center for Men matched this criteria)
Residents who reported sexual abuse – 1 (one resident housed at CenterPoint Recovery Center for Men matched this criteria)
Residents who disclosed victimization during a risk assessment - 2 (two residents housed at CenterPoint Recovery Center for Men matched this criteria)

All residents interviewed were consistent in their responses. Residents confirmed the facility's compliance with the standards that require rules against sexual abuse and sexual harassment, their right to not be sexually harassed or sexually abused, and how to report such incidents. Each resident was able to detail several different ways to report sexual abuse and sexual harassment allegations, including reporting anonymously and via a third party. Residents stated that they are not seen by staff while they are using the toilet, shower, or changing clothes. All residents reported feeling safe and sexually safe. No areas of concern were raised by the interviewed residents.

While on site, the Auditor conducted a test of the PREA reporting hotline. CenterPoint Recovery Center for Men residents can report sexual abuse or sexual harassment to a public entity that is not part of CenterPoint Recovery Center for Men via the PREA Hotline, which allows the resident to remain anonymous upon request. The hotline information is received and immediately forwarded to Kentucky Department of Corrections officials. The Auditor found this reporting system acceptable and deemed this test successful.

Throughout the on-site review, staff were observed engaging in positive interactions with the resident population and with other staff. The Auditor was very impressed when every staff member's response to questions regarding the reporting of allegations was to first ensure the safety of the residents.

Record Review

A facility record review was completed by the Auditor while on site. This included staff and resident PREA-related records and PREA investigative reports.

Staff Files

The Auditor selected and reviewed a variety of documents, files, and records discussed in detail below. Document sample sizes were derived from direction in the PREA Auditor Handbook. The file selections, as with the interview selections, span a variety of job functions

and post assignments, including supervisory, line staff, and specialized jobs.

The Auditor requested the records for employees' background checks, training records, and disciplinary sanctions. The Auditor reviewed 12 personnel records, which included evidence of background checks and discipline. Training records for all staff were also reviewed to confirm all had received initial PREA training.

PREA Investigations

The Auditor requested and was provided access to the investigative files. There were no reported allegations of sexual abuse or harassment nor investigative reports for the past 12 months.

Resident Files

The Auditor requested the randomly-selected and targeted residents' intake records, medical/mental health records, risk assessment, bed assignment, training records, and disciplinary sanctions. The Auditor reviewed 16 resident files for documentation of PREA education, medical and mental health records, screening risk assessment, and appropriate bed and housing assignment. As part of the audit, the Auditor observed a resident intake and reviewed the PREA information used for resident's PREA education.

Grievance Program

The Auditor reviewed the resident grievance program. During an interview, the Site Administrator/PREA Coordinator explained the facility's grievance process. There were no PREA-related grievances reported in the past 12 months preceding the PREA Audit.

Exit Briefing

The Auditor concluded the on-site portion of the audit on evening of June 23, 2021 with an exit interview briefing. The meeting was attended by members of the Facility Executive Management Team. This included:

Thelma Hunter, Division Director, Four Rivers Behavioral Health

Max Grantham, Site Administrator/PREA Coordinator

The Auditor thanked the facility for their hospitality and transparency; identified compliance-related strengths and weakness; briefly discussed compliance-related opportunities; and explained the post on-site phase, which may include requests for clarification or additional documentation; a detailed standards analysis; corrective action plan development; report writing; and the issuance of an interim and/or final report.

PHASE THREE: POST-ON-SITE AUDIT

After the on-site portion of the audit, the Auditor began a systematic review of the evidence utilizing the Auditor Compliance Tool for Community Confinement Facility as a guide to determine compliance with each standard. The Auditor triangulated the information from the PAQ as provided prior to the audit, policies and procedures, information observed from the site review tour, documents collected while on site, and information obtained from both the staff and resident interviews to complete a systematic review and determination of compliance for each provision of every standard and to write a professional and thorough audit report. The Auditor also had several follow-up conversations with the Site Administrator/PREA Coordinator during this phase.

At the completion of all phases of this PREA Audit, the Auditor identified no additional open issues requiring corrective action, allowing a final report to be issued. The final report was completed on August 1, 2021 and forwarded to the facility on August 2, 2021.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Facility

Four Rivers Behavioral Health is a private non-profit agency that operates the CenterPoint Recovery Center for Men facility located at 530 County Park Road, Paducah, KY. The 125-bed facility is a recovery program (Alcohol or Drug Rehabilitation Center) for adult men that opened in 2010. CenterPoint Recovery Center for Men is a men's substance abuse treatment program and intense six (6) month residential program. The facility is housed in one building (the facility is a community confinement facility). A Central Monitoring Office (CMO) is located at the entrance of the facility and monitors individuals coming in or going out of the facility, requiring visitors and residents to sign in and sign out on log sheets that are maintained by the facility. The main area includes a community kitchen, pantry, dining hall, lounge, meditation chapel, laundry rooms, peer mentor office, meeting rooms, conference room, the Safe off the Street (SOS) Intake Dorm, Motivational Tract (MT) Dorm, resident and staff bathrooms, property room, medical offices/exam area, resident visitation area, hallways and common areas, Outside the main building is a storage garage, an outside liesure area, and a outdoor exercise area. All meeting rooms, offices, and classrooms have hallway doors with a window in them and are open and well lit. The facility was modern, extremely clean, and well maintained.

Housing Areas

The facility is a free-standing T-shaped building with a two-story wing. In the main building, there are three (3) open bay/dorm housing units (SOS Dorm - 8 bunk/16 beds; MT Dorm - 8 bunk/16 beds; and C Dorm -16 single beds) with a staff monitor desk in each dorm in view of all residents. Each dorm has a single bathroom with a sink, a shower with a curtain, and a stall with a toilet with a door to provide residents with privacy. The wing consists primarily of two (2) housing units on two (2) floors (1st floor - 16 rooms/32 beds; and 2nd floor - 22 rooms/44 beds. These are semi-private rooms with solid hallway doors, each containing two (2) twin beds, cabinets, and a private bathroom with a shower, toilet, and sink. Staff check the residents every hour half in these rooms. Each floor has a laundry room for residents to use on a set schedule. The hallway doors for the laundry rooms contains a window. There are no speacil housing units nor isolation areas.

The PREA Audit notice and posters containing PREA information, including the PREA hotline number, are prominently posted on bulletin boards, dining area, hallways, classrooms, meeting rooms, and dorms. There are currently 28 camaras that cover common areas both inside and outside the facility, with monitors located in the Central Monitoring Office (CMO). The facility continues to have on-going discussions regarding adequate levels of staffing and/or future possibility of utilizing more video monitoring equipment in order to protect both residents and staff from sexual harassment, sexual abuse, and/or allegations of such. There have been no significant modifications made to this facility since August 20, 2012.

Staffing

CenterPoint Recovery Program for Men adheres to the Kentucky Department of Corrections (KY DOC) policy that requires twenty-four (24) hour awake supervision by staff to protect residents from sexual abuse. The staffing is as follows:

- Site Administrator (1)
- Office Manager (1)
- Kitchen and Facility Manager (1)
- Phase I Coordinator (1)
- Phase II Coordinator (1)
- Health Services Coordinator (1)
- Motivational Track Coordinator (1)
- Nurse/SOS Coordinator (1)
- Peer Mentor Supervisors (1)
- Caseworker Supervisor (1)
- Caseworkers (18)
- Housing Administrator (1 - not included in the facility staffing plan)
- Peer Mentors (6 - not included in the facility staffing plan)

Admission/Intake

The SOS Intake Area includes one open booking desk within the SOS dorm. The facility has medical coverage onsite eight hours a day, five days a week. The nurse conducts screening on all new admissions, dispenses medications, and provides medical treatment when necessary. The risk assessment, as well as the more comprehensives PREA information education, is conducted by the Site Administrator

in his private office, one-on-one with the resident.

Recovery Program

Upon intake, each resident is placed in the Safe Off the Streets (SOS) dorm unit. During this phase, they receive in-depth orientation to the program and are introduced to the 12 Steps of Alcoholics Anonymous and the classroom curriculum of Recovery Dynamics developed by the Kelly Foundation. The residents are given an intake/orientation to the Kentucky Department of Corrections and CenterPoint Recovery Center for Men PREA policy procedures (including PREA education). Each resident signs an acknowledgement form that is placed in a hardcopy file that is maintained in the Phase II Coordinator's office. The resident is screened for risk of sexual victimization and sexual abusive behavior, the screening instrument contains all 9 criteria to assess residents for risk of victimization and/or sexually abusive behavior. Documentation of the screening instrument is maintained in each resident's file and facility reassesses the resident's risk of victimization or abusiveness based upon any additional relevant information received by the facility since the initial screening and/or in 30 days as part of the promotion process.

The facility policy strictly controls the dissemination of information gathered from the screening. During SOS phase residents have the opportunity to become acclimated to group living and the overall structure of the recovery program while attending educational classes and 12 step support group meetings with their peers in the program. Residents, at their own individual pace, can be promoted to Motivational Track (MT). During MT phase residents begin trudging (walking in groups with their peers daily) and attending Recovery Dynamics classes off site. Trudging builds a sense of camaraderie and residents begin to trust and lean on one another for support. Residents continue to live at the facility but spend the majority of the class day off site in educational classes and attending 12 step support group meetings. Residents can be promoted to Phase I (PI), during this phase the residents begin to work in depth on the 12 steps of Alcoholics Anonymous and begin to study and understand their addiction. During this phase residents spend a great deal of time in Recovery Dynamics classes and 12 step support group meetings.

These residents continue to live at the facility and receive the overall support of the staff. The fourth phase, Phase II (PII) Peer Mentors Phase are near completion of the 12th step of Alcoholic Anonymous and are ready to begin the process of reentry. Reentry means being introduced and coming back into the lives of those most directly affected by their addiction. Residents may become a peer mentor at CenterPoint Recovery Center for Men, obtain outside employment, continue their program of recovery, begin to visit and repair relationships with children and other family members, address court and legal issues, and work diligently to maintain sobriety while still in the protected environment of the facility.

AUDIT FINDINGS**Summary of Audit Findings:**

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). 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

On June 22-23, 2021, a two (2) day PREA compliance audit was completed for the CenterPoint Recovery Center for Men, located at 530 County Park Road, Paducah, Kentucky. The final results indicate the facility was found to be in substantial compliance with all of the requirements of the Community Confinement Facility Standards, United States Department of Justice Final Rule, National Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA), 28 C.F.R. Part 115, dated May 17, 2012.

Standard Exceeded: N/A

Standards Met: 115.211; 115.212; 115.213; 115.215; 115.216; 115.217 115.218; 115.221; 115.222; 115.231; 115.232; 115.233; 115.244; 115.235; 115.241; 115.242; 115.251; 115.252; 115.253; 115.254; 115.261; 115.262; 115.263; 115.264; 115.265; 115.266; 115.267; 115.271; 115.272; 115.273; 115.276; 115.277; 115.278; 115.282; 115.283; 115.286; 115.287; 115.288; & 115.289; 115.401 & 115.403

Standards Not Met: N/A

Corrective Action

None

Recommendation

Laundry Rooms: The Auditor noted a supervision concern regarding the lighting in the resident access laundry rooms. These rooms, located on the 1st and 2nd floor wings are large and without natural light and depends upon artificial light with resident-controlled wall switches. The Auditor recommended the facility replace the wall light switches with motion activated wall switches to increase the supervision in the laundry room. This recommendation was accepted by the facility and it was immediately corrected by the facility's maintenance staff. Motion sensor light switches were procured and installed. This recommendation was verified by the Auditor via photographic proof on July 1, 2021. This issue is now deemed closed.

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Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. The CenterPoint Organizational Chart (revised 6/21) <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Posted information – The CenterPoint Recovery Program for Men PREA Information Poster <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion during site tour 2. Divisional Director 3. Site Administrator 4. PREA Coordinator <p>Findings (by provision)</p> <p>115.211 (a): The CenterPoint Recovery Program for Men (CenterPoint) has a PREA Policy, titled: Compliance with Prison Rape Elimination Act (PREA). This policy was reviewed by the Auditor and found to be very comprehensive. The policy mandates zero-tolerance towards all forms of sexual abuse and sexual harassment and outlines the agency's strategies on preventing, detecting, and responding to such conduct within CenterPoint and the designation of the PREA Coordinator (PC).</p> <p>The PREA policy addresses Prevention Planning of sexual abuse and sexual harassment; Responsive Planning through the following major provisions: Staff hiring and screening processes (which includes the requirements to conduct criminal history background checks and to check child abuse registries); Staff Training (Staff, Volunteers, and Contractors); Staffing Plans: Risk Screening of Sexual Victimization and abusiveness; Resident PREA Education and Staff Training, Reporting Sexual Abuse/Misconduct; "Responding" to allegations of sexual abuse and sexual harassment (which is addressed through provisions detailing Reporting, Investigations, Victim Services, Medical and Mental Health Care); Discipline; Incident Review; and Data Collections and Analysis.</p> <p>This PREA policy is detailed, comprehensive and consistent with the PREA standards and outlines the agency's overall approach to sexual safety. Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Division Director and the Site Administrator.</p> <p>115.211 (b): CenterPoint PREA Policy, page 2, outlines the roles and responsibilities of the PREA Coordinator (PC). It calls for the position to be allowed sufficient time and authority to develop, implement, and oversee the facility's efforts to comply with the PREA standards in the facility. The agency's organizational chart reflects that the PC position is an upper-level position. The job description confirms the PC's responsibilities. The PREA Coordinator is the Site Administrator / PREA Coordinator.</p> <p>The PC was interviewed and he states that he has sufficient time to focus on the PREA standards and the freedom to divert responsibilities to other staff as needed to focus on implementing and sustaining the PREA efforts. He stated that he has direct access to the Divisional Director and can implement policies and practices as necessary to ensure sexual safety requirements.</p> <p>Based on the review of the Pre-Audit questionnaire and related documents submitted, PREA implementation appears to be organized and well-documented under the leadership of the PC. The preparedness for the audit and overall incorporation of institutionalized sexual safety practices demonstrates that the PC has sufficient time and authority to accomplish PREA responsibilities for the agency. Additionally, the PC's ability to delegate other duties, when necessary, further demonstrates he has sufficient time for overseeing PREA and sexual safety practices in the agency.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Divisional Director and the Site Administrator / PREA Coordinator.</p>

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring a zero-tolerance policy towards all forms of sexual abuse and sexual harassment, and the designation of a PC. No corrective action is required.

115.212	Contracting with other entities for the confinement of residents
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. The CenterPoint Organizational Chart (revised 6/21) 4. The CenterPoint Recovery Program for Men (CenterPoint) residents' records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Posted information – PREA Information Poster <p>Interviews</p> <ol style="list-style-type: none"> 1. Divisional Director 2. Site Administrator 3. PREA Coordinator <p>Findings (by provision)</p> <p>115.212 (a): This standard is not applicable. The CenterPoint Recovery Program for Men (CenterPoint) has not entered into or renewed a contract for the confinement of residents.</p> <p>Compliance with this provision was confirmed by interviews of the Divisional Director and Site Administrator and a review of the Agency's Sexual Abuse Prevention and Intervention Program Policy.</p> <p>115.212 (b): This provision is not applicable. The CenterPoint Recovery Program for Men (CenterPoint) does not contract with other entities for the confinement of residents.</p> <p>Compliance with this provision was confirmed by interviews of the Divisional Director and Site Administrator and a review of the CenterPoint residents' records.</p> <p>115.212 (c): This provision is not applicable. The CenterPoint Recovery Program for Men (CenterPoint) does not contract with other entities for the confinement of residents.</p> <p>Compliance with this provision was confirmed by interviews of the Divisional Director and Site Administrator and a review of the CenterPoint residents' records.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard regarding contracting with other entities for the confinement of residents. No corrective action is required.</p>

115.213	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. The CenterPoint Organizational Chart (revised 6/21) 4. CenterPoint PREA Staffing Plan <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Living Units staffing deployment <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion during site tour 2. Divisional Director 3. Site Administrator 4. PREA Coordinator 5. Case Workers <p>Findings (by provision)</p> <p>115.213 (a): CenterPoint has developed, implemented, and documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse. The facility's staffing plan had taken into consideration 5 out of the 5 criteria in calculating adequate staffing levels and determining the need for video monitoring.</p> <p>Compliance with this provision is based upon interviews with the Divisional Director and Site Administrator / PREA Coordinator and a review of the facility's staffing plan.</p> <p>115.213 (b): This provision is not applicable. CenterPoint complies with the staffing plan at all times. By policy, they would document any time they had to deviate from the staffing plan during limited and discrete exigent circumstances. The facility has not deviated from its staffing plan during this audit period.</p> <p>Compliance with this provision is based upon interviews with the Divisional Director and Site Administrator / PREA Coordinator and a review of the facility's staffing plan.</p> <p>115.213 (c): The Site Administrator / PREA Coordinator annually reviews the staffing plan to see whether adjustments are needed. CenterPoint has a policy for holding annual team review meetings to assess, determine, and document whether adjustments are needed to: (a) the staffing plan; (b) prevailing staffing patterns; (c) the deployment of monitoring technology; or (d) the allocation of agency or facility resources to commit to the staffing plan to ensure compliance with the staffing plan. The PREA Coordinator stated these review meetings happen annually. This was supported by the Auditor's review of an Annual Staffing Plan Review Meeting Report.</p> <p>Compliance with this provision is based upon interviews with the Divisional Director and Site Administrator / PREA Coordinator and a review of the facility's staffing plan.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the facility develop and document a staffing plan that provides for adequate levels of staffing and video monitoring to protect residents against sexual abuse. No corrective action is required.</p>

115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. CenterPoint Staffing Training Presentation 4. CenterPoint Staff Training Records. <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Auditor Observation <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion during site tour 2. PREA Coordinator 3. Randomly selected Staff 4. Randomly selected Residents <p>Findings (by provision)</p> <p>115.215 (a) CenterPoint prohibits cross-gender strip searches and cross-gender visual body cavity searches of residents. CenterPoint is a male-only facility. This was supported by resident and staff interviews.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's policy and supported by interviews with randomly selected residents and staff.</p> <p>115.215 (b): This provision is not applicable. CenterPoint is a male only facility.</p> <p>115.215 (c): CenterPoint prohibits cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches under all circumstances. There is no documentation or documented justification for any cross-gender strip searches, cross-gender visual body cavity searches, or cross-gender pat-down searches of residents. This is supported by resident and staff interviews. In the past 12 months, zero (0) cross-gender pat-down searches of residents were conducted.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's policy and supported by interviews with randomly selected residents and staff.</p> <p>115.215 (d): CenterPoint does require staff of the opposite gender to announce their presence when entering a resident housing unit. This practice was observed by the Auditor and confirmed during resident interviews. All residents shower, perform bodily functions, and change clothing without being viewed by staff in individual bathrooms. Policy and practice verified by interviews of staff and residents and the Auditor's observation.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with randomly selected residents and staff.</p> <p>115.215 (e): CenterPoint 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.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's policy and supported by interview with the PREA Coordinator.</p> <p>115.215 (f): CenterPoint staff have 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. Training records verified that these staff have 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.</p>

Compliance with this provision was based upon the Auditor's review of the facility staff training records and a review of the lesson plan. Also supported by interviews with randomly selected staff and review of the training material and records.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard. No corrective action is required.

115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1026 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 304 360 331">Documents</p> <ol data-bbox="240 360 1262 506" style="list-style-type: none"> <li data-bbox="240 360 991 387">1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men <li data-bbox="240 416 1262 443">2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act <li data-bbox="240 472 655 499">3. CenterPoint Language Line Contract <p data-bbox="240 533 504 560">Site Review Observations</p> <ol data-bbox="240 589 770 616" style="list-style-type: none"> <li data-bbox="240 589 770 616">1. Posted information – PREA Informational Poster <p data-bbox="240 649 347 676">Interviews</p> <ol data-bbox="240 705 639 965" style="list-style-type: none"> <li data-bbox="240 705 639 732">1. Informal discussion during site tour <li data-bbox="240 761 475 788">2. PREA Coordinator <li data-bbox="240 817 587 844">3. Randomly-selected Residents <li data-bbox="240 873 472 900">4. Divisional Director <li data-bbox="240 929 467 956">5. Site Administrator <p data-bbox="240 990 472 1016">Findings (by provision)</p> <p data-bbox="240 1050 1477 1310">115.216 (a): CenterPoint provides non-English residents with access to interpreters through Language Line Solutions. Non-English PREA Informational Posters and other signage were noted throughout the facility during the tour. CenterPoint takes 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, who are blind or have low vision, who have intellectual disabilities, who have psychiatric disabilities, and who have speech disabilities. The facility ensures that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities, including residents who have intellectual disabilities, have limited reading skills, or are blind or have low vision.</p> <p data-bbox="240 1341 1449 1400">Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Site Administrator and the Divisional Director.</p> <p data-bbox="240 1431 1457 1624">115.216 (b): CenterPoint takes 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. This includes providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, through the Language Line Solutions. No residents with disabilities were available to interview at the facility during the time of the audit. Interviews with randomly-selected residents support this policy and practice.</p> <p data-bbox="240 1655 1449 1713">Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Site Administrator and the Divisional Director.</p> <p data-bbox="240 1744 1410 1803">115.216 (c): CenterPoint policy prohibits residents from being used as interpreters. There was no documented use of residents as interpreters in the past 12 months.</p> <p data-bbox="240 1834 1449 1892">Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Site Administrator and the Divisional Director.</p> <p data-bbox="240 1924 1406 1982">Evidences used to determine standard compliance includes a review of CenterPoint's PREA Policy and interviews of randomly-selected residents, the Site Administrator, and the Divisional Director.</p> <p data-bbox="240 2013 1497 2148">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) to 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</p>

and sexual harassment. No corrective action is required.

115.217	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint Employee Records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Site Observation of HR Office Record Security <p>Interviews</p> <ol style="list-style-type: none"> 1. Human Resources (HR) Director 2. PREA Coordinator 3. Site Administrator <p>Findings (by provision)</p> <p>115.217 (a): CenterPoint prohibits 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 or 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. Personnel files were reviewed for all staff hired or promoted within the past 12 months to determine whether proper criminal record background checks had been conducted and questions regarding past conduct were asked and answered. The facility conducts criminal record checks of all new employees prior to hiring and then every five years thereafter. The facility conducts child abuse record checks of all new employees prior to hiring and again every five years thereafter.</p> <p>Compliance with this provision was based upon a review of the employee records and supported by interviews with the Human Resources (HR) Director.</p> <p>115.217 (b): CenterPoint considers any incident of sexual harassment or sexual abuse prior to hiring or promoting any staff, or enlisting the services of any contractor.</p> <p>Compliance with this provision was based upon the review of the CenterPoint Recovery Program for Men (CenterPoint) PREA policy and interviews with the HR Director and the Site Administrator.</p> <p>115.217 (c): CenterPoint considers any incident of sexual harassment or sexual abuse before hiring new employees who may have contact with residents, promoting any staff, or enlisting the services of any contractor. CenterPoint consults any child abuse registry maintained by the State or locality in which the employee had worked or lived and 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.</p> <p>Compliance with this provision was based upon the review of the PREA policy and interviews with the HR Director and the Site Administrator.</p> <p>115.217 (d): CenterPoint conducts a criminal background records check and consults applicable child abuse registries before enlisting the services of any contractor who may have contact with residents. Department of Human Services Child Abuse clearance, State Criminal Background checks, and Federal Bureau of Investigation background checks are completed periodically as required.</p> <p>Compliance with this provision was verified through interviews with the HR Director and the Site Administrator.</p> <p>115.217 (e): CenterPoint conducts criminal background records checks of all current employees and contractors (who may have contact with residents) every five years. The criminal history record check is managed via a spreadsheet tracking system.</p>

Compliance with this provision was verified by a review of employee records and through interviews with the HR Director and the Site Administrator.

115.217 (f): CenterPoint requires all employees to disclose any previous misconduct and imposes upon them a continuing affirmative duty to disclose any allegations of sexual misconduct or abuse.

Compliance with this provision was verified through interviews with the HR Director and the Site Administrator.

115.217 (g): CenterPoint policy and practice is that material omissions regarding misconduct or the provision of materially false information by an employee, is grounds for termination.

Compliance with this provision was based upon the review of the PREA policy and interviews with the HR Director and the Site Administrator.

115.217 (h): CenterPoint provides 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.

Compliance with this provision was based upon interviews with the HR Director and the Site Administrator.

Evidences used to determine provision compliance include a review of the PREA policy, employee records, and interviews with the Human Resources Director and the Site Administrator.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility meets the requirements of this standard by annually conducting criminal background checks of all employees and meets the standards for all other hiring and promotion decision requirements. No corrective action is required.

115.218	Upgrades to facilities and technology
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Tour areas of the facility 2. Video monitoring system <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion during site tour 2. PREA Coordinator 3. Site Administrator 4. Divisional Director <p>Findings (by provision)</p> <p>115.218 (a): N/A; CenterPoint has not acquired a new facility or made a substantial expansion to existing facilities since the last PREA audit. By policy, CenterPoint would consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse if it designed or acquired any new facility or planned any substantial expansion or modification of existing facilities.</p> <p>Compliance with this provision was based upon a review of the PREA policy and the Auditor's observations during the tour of the facility, and is supported by interviews with the Divisional Director and the Site Administrator.</p> <p>115.218 (b): CenterPoint updated its video monitoring system within the last few years and it was done with PREA in mind to enhance the facility's ability to protect residents from sexual abuse. The Auditor reviewed the updated video monitoring system and was impressed by its capabilities and clarity.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility, a review of the video monitoring system, and is supported by interviews the Divisional Director and the Site Administrator.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard that requires any upgrades to facilities and technologies to consider the protection of residents from sexual abuse when designing or acquiring any new facility or planning any substantial expansion or modification of existing facilities. No corrective action is required.</p>

115.221	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. The Hope Center for Men PREA Informational Brochures 4. CenterPoint MOU with the Lotus Children's Advocacy & Sexual Violence Center (4/30/21) 5. CenterPoint residents' medical files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Randomly-selected Residents 2. PREA Coordinator 3. Site Administrator 4. Medical Staff 5. Divisional Director <p>Findings (by provision)</p> <p>115.221 (a): By policy, CenterPoint follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings. The Kentucky State Police Department are responsible for conducting criminal sexual abuse investigations, including resident-on-resident sexual abuse or staff sexual misconduct.</p> <p>Compliance with this provision was based upon the Auditor's review of agency policy, and interviews with the Divisional Director and the Site Administrator/PREA Coordinator.</p> <p>115.221 (b): This provision is not applicable; CenterPoint is a male-only facility and there are no youths in the facility.</p> <p>115.221 (c): CenterPoint does not conduct SAFE/SANE exams as confirmed by Medical staff. No SAFE or SANE staff are employed at this facility. However, SAFEs or SANEs medical professionals are provided at the Lotus Children's Advocacy & Sexual Violence Center where forensic examinations would be conducted at no cost to the resident and/or to their family. Mental health services (e.g., meeting with a victim at the hospital as an advocate and providing counseling and support) can be provided locally by the Lotus Children's Advocacy & Sexual Violence Center if/when needed. CenterPoint documents its efforts to provide SAFEs or SANEs medical practitioners and files these documents in the resident's medical file.</p> <p>Compliance with this provision was based upon the Auditor's review of PREA policy and is supported by interviews with Medical staff.</p> <p>115.221 (d): CenterPoint makes available to the victim, a victim advocate from a rape crisis center, specifically from the Lotus Children's Advocacy & Sexual Violence Center. Lotus Center is a full-service rape crisis center. This was supported by a review of the Lotus Center's website and an interview with the Site Administrator/PREA Coordinator.</p> <p>Compliance with this provision was based upon the Auditor's review of the CenterPoint MOU with the Lotus Children's Advocacy & Sexual Violence Center and interviews with the Divisional Director and the Site Administrator/PREA Coordinator.</p> <p>115.221 (e): By policy and upon request by the victim, the facility would provide a victim advocate, qualified agency staff member, or qualified community-based organization staff member to accompany and support the victim through the forensic medical examination process and investigatory interviews. No residents at the facility have reported a sexual abuse incident. The Site Administrator/PREA Coordinator reports that the Lotus Children's Advocacy & Sexual Violence Center would provide emotional support, crisis intervention, information, and referrals.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's policy and interviews with the Divisional</p>

Director and the Site Administrator/PREA Coordinator.

115.221 (f): CenterPoint conducts administrative sexual abuse investigations, The facility would refer all criminal sexual abuse investigations, including resident-on-resident sexual abuse or staff sexual misconduct, to the Kentucky Department of Corrections (KY DOC) and/or Kentucky State Police (KSP). The facility has maintained a very good working relationship with the Kentucky Department of Corrections and the Kentucky State Police regarding following the requirements of paragraphs (a) through (e) in §115.221.

Compliance with this provision was based upon the Auditor's review of the facility's PREA policy and interviews with the Divisional Director and the Site Administrator/PREA Coordinator.

115.221 (g): The Auditor is not required to audit this provision.

115.221 (h): This provision is not applicable. CenterPoint makes available a victim advocate from a rape crisis center, specifically from the Lotus Children's Advocacy & Sexual Violence Center to victims per #115.221(d).

Evidences used to determine standard compliance include a review of residents' medical files and interviews of Medical Staff, randomly-selected Residents, the Divisional Director, and the Site Administrator/PREA Coordinator.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility has demonstrated compliance with all provisions of this standard. No corrective action is required.

115.222	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. CenterPoint's Website (Home - Four River Behavioral Health: 4rbh.org) 4. CenterPoint PREA Investigative Files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigative Staff 2. PREA Coordinator 3. Site Administrator <p>Findings (by provision)</p> <p>115.222 (a): CenterPoint has ensured that all administrative investigations of sexual abuse allegations and sexual harassment allegations were completed. In the past 12 months, there was no allegations resulting in an administrative investigation and zero (0) allegations were referred for criminal investigation.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's PREA investigative case files and supported by interviews with the Facility Investigator and the PREA Coordinator.</p> <p>115.222 (b): The facility has a policy, that states "(a) Allegations of sexual abuse or sexual harassment will be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The determination of whether an allegation involves potentially criminal behavior will be made by the Director of Programs." The facility has documented all such referrals. Investigative policies were verified on the facility's website and the referral form for third-party reporting was also verified on-line.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's policy to ensure allegations were referred for investigation, and is supported by interviews with the Facility Investigator and the PREA Coordinator.</p> <p>115.222 (c): CenterPoint 's website does describe that the Kentucky Department of Corrections (KY DOC) and/or Kentucky State Police (KSP), would be responsible for conducting criminal sexual abuse investigations, and that they have the legal authority to conduct criminal investigations.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's website and supported by interviews with the Facility Investigator and the PREA Coordinator.</p> <p>115.222 (d-e): Auditor is not required to audit these provisions.</p> <p>Evidences used to determine standard compliance include a review of the facility's policies to ensure allegations were referred for investigation, a review of PREA investigative case files, and interviews with the Facility Investigator and the PREA Coordinator.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is in full compliance with this standard requiring policies to ensure referrals of allegations for investigations. The facility's website does describe that the Kentucky Department of Corrections (KY DOC) and/or Kentucky State Police (KSP), would be responsible for conducting criminal sexual abuse investigations and they have the legal authority to conduct criminal investigations. Therefore, no corrective action is required.</p>

115.231	Employee training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint Staff Training Lesson Plan 4. Staff Training Records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Staff training classroom <p>Interviews</p> <ol style="list-style-type: none"> 1. Randomly-selected Staff 2. PREA Coordinator 3. Trainer Coordinator <p>Findings (by provision)</p> <p>115.231 (a): CenterPoint 's employee training program includes all of the required elements for this standard. A review of the facility's lesson plan shows they train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment; How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment; The dynamics of sexual abuse and sexual harassment in confinement facilities; The common reactions of confinement victims of sexual abuse and sexual harassment; How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents; How to avoid inappropriate relationships with residents; How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and the relevant laws regarding the applicable age of consent. This was supported by the interview of 12 randomly-selected staff.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's PREA Training Lesson Plan and supported by interviews of randomly-selected staff and the facility's Trainer Coordinator.</p> <p>115.231 (b): CenterPoint's training lesson plans are tailored to the unique needs and attributes of residents of confinement facilities and to the gender of the residents at CenterPoint, an all-male population.</p> <p>Compliance with this provision was based upon the Auditor's review of the facility's PREA Training Lesson Plan and supported by interviews of randomly-selected staff and the facility's Trainer Coordinator.</p> <p>115.231 (c): CenterPoint provided PREA training to all current employees and all new employees hired within this audit period at the start of their employment. All employees are provided refresher training at an all-staff meeting on the procedures if an allegation has been made. This has happened yearly during this audit period.</p> <p>Compliance with this provision was based upon the Auditor's review of CenterPoint employees' PREA training records and supported by interviews of randomly-selected staff and the facility's Trainer Coordinator.</p> <p>115.231 (d): CenterPoint maintains training documents in both hard copy and digital versions with all employees' signatures, verifying comprehension of training.</p> <p>Compliance with this provision was based upon the Auditor's review of CenterPoint employees' PREA training records.</p> <p>Evidences used to determine standard compliance include a review of the facility's PREA Training Lesson Plans and CenterPoint employees' PREA training records, and was supported by interviews of randomly-selected staff and the facility's Trainer Coordinator.</p>

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility meets the standard's requirement for employee training and no corrective action is required.

115.232	Volunteer and contractor training
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 360 358">Documents</p> <ol data-bbox="242 387 1254 528" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint Employee records <p data-bbox="242 557 504 586">Site Review Observations</p> <ol data-bbox="242 616 517 645" style="list-style-type: none"> 1. Staff training classroom <p data-bbox="242 674 347 703">Interviews</p> <ol data-bbox="242 732 469 815" style="list-style-type: none"> 1. PREA Coordinator 2. Site Administrator <p data-bbox="242 844 472 873">Findings (by provision)</p> <p data-bbox="242 902 1489 994">115.232 (a): CenterPoint does not employ any volunteers nor contractors, therefor this provision is not applicable. Compliance with this provision was based upon a review of the employee records and interviews with the Site Administrator / PREA Coordinator.</p> <p data-bbox="242 1023 1489 1115">115.232 (b): CenterPoint does not employ any volunteers nor contractors, therefor this provision is not applicable. Compliance with this provision was based upon a review of the employee records and interviews with the Site Administrator / PREA Coordinator.</p> <p data-bbox="242 1144 1489 1236">115.232 (c): CenterPoint does not employ any volunteers nor contractors, therefor this provision is not applicable. Compliance with this provision was based upon a review of the employee records and interviews with the Site Administrator / PREA Coordinator.</p> <p data-bbox="242 1265 1410 1332">Evidences used to determine standard compliance includes a review of the facility's employee records confirming no volunteers and contractors and interviews with the Site Administrator / PREA Coordinator.</p> <p data-bbox="242 1361 1497 1429">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring volunteer and contractor PREA training. No corrective action is required.</p>

115.233	Resident education
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. CenterPoint PREA Statement for Clients 4. CenterPoint Residents' Training Records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Tour of common areas of the facility 2. Tour of Living Units <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion with randomly-selected residents during site tour 2. PREA Coordinator 3. PREA Compliance Manager 4. Intake Staff 5. Program Director <p>Findings (by provision)</p> <p>115.233 (a): CenterPoint provides all PREA required information to residents upon intake. Residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment and this information is presented in an age-appropriate fashion. This was confirmed during resident interviews. All residents sign a PREA acknowledgement training record document.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Intake Staff, interviews with randomly-selected residents, and review of residents' files.</p> <p>115.233 (b): CenterPoint provides residents with refresher PREA information throughout their stay. They facility does not transfer residents to any different facilities. During interviews of randomly-selected residents, all confirmed that they had seen the PREA education that was provided at intake and during a one-on-one with the PREA Coordinator later during their stay. This was also confirmed by interviews with the Intake Staff.</p> <p>Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Intake Staff, interviews with randomly-selected residents, and review of residents' files..</p> <p>115.233 (c): PREA education is in formats accessible to all residents, including those who have limited reading skills, English proficient, are deaf, visually impaired and otherwise disabled. The facility has access to Language Line Solution, maintains a list of bilingual staff, and has one-on-one access to facility staff explaining the PREA information and rights.</p> <p>Compliance with this provision is based upon the Auditor's observations during the tour of the facility and is supported by interviews with the PREA Coordinator/Program Director.</p> <p>115.233 (d): The Auditor's review of 16 residents' files found documentation where each resident had received the training prescribed in section (b). During orientation, the intake staff reads the PREA brochure to each resident. All resident-signed PREA training records were provided to, and verified by, the Auditor. The Auditor confirmed the training records were also securely maintained.</p> <p>Compliance with this provision is based upon the Auditor's review of the PREA training records for all residents. The Auditor verified the initial PREA acknowledgement forms were signed by residents and were securely maintained.</p>

115.233 (e): PREA education and reporting posters are placed throughout the facility. The residents are given a PREA tri-fold pamphlet (brochure) at intake. The Auditor noted that the pamphlet and the PREA informational posters that were posted throughout the facility had the correct PREA Hotline reporting number (1-855-362-PREA).

Compliance with this provision was based upon the Auditor's observations during the tour of the facility and supported by interviews with the Intake Staff and randomly-selected residents, and review of the resident PREA training materials.

Evidences used to determine standard compliance includes a review of case files and interviews of randomly selected residents, the PREA Coordinator, Intake Staff, and the Program Director. The residents are informed about CenterPoint 's zero-tolerance policy and how to report incidents or suspicions of sexual abuse and sexual harassment during the intake process. In addition to providing such education, key PREA information is continuously and readily available or visible to residents through posters, the PREA tri-fold pamphlet, or other written formats. CenterPoint has access to the Language Line and maintains a list of all bilingual facility staff. The facility never uses other residents as language interpreters.

Based upon the review and analysis of all the available evidence, the Auditor finds the facility is fully compliant with this standard. No corrective action is required.

115.234	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination: Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. Investigators' Training Records and Certificates <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigative Staff <p>Findings (by provision)</p> <p>115.234 (a): CenterPoint conducts administrative investigations only and ensures that its investigators have received training in conducting sexual abuse investigations in confinement settings. Training records for the facility's two (2) sexual abuse investigators were reviewed by the Auditor and confirmed that the dates and type of training received was consistent with the requirements of this provision.</p> <p>Compliance with this provision was based upon the Auditor's review of the training records and supported by interviews with the Investigative Staff.</p> <p>115.234 (b): CenterPoint specialized training for investigators includes: Techniques for interviewing confinement sexual abuse victims; Proper use of Miranda and Garrity warnings; Sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The training certificate is the National Institute of Corrections, PREA: Investigating Sexual Abuse in a Confinement Setting Program.</p> <p>Compliance with this provision was based upon the Auditor's review of the training records and supported by interviews with the Investigative Staff.</p> <p>115.234 (c): CenterPoint maintains documentation of its investigators' training certificates. This was verified by the Auditor in a review of the facility's training records. The facility has two (2) trained investigators.</p> <p>Compliance with this provision is based upon the Auditor's review of the training records and is supported by interviews with the Investigative Staff.</p> <p>115.234 (d): Auditor is not required to audit this provision</p> <p>Evidences used to determine standard compliance includes a review of training records and interviews with the Investigative Staff.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring that investigators are trained in conducting sexual abuse investigations in a confinement setting. No corrective action is required.</p>

115.235	Specialized training: Medical and mental health care
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 304 360 333">Documents</p> <ol data-bbox="242 360 1262 562" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint Specialized Mental Health and Medical Professional Training Course 4. Medical and Mental Health Staff Training Certificates and Personnel Records <p data-bbox="242 591 504 620">Site Review Observations</p> <ol data-bbox="242 647 320 676" style="list-style-type: none"> 1. N/A <p data-bbox="242 705 347 734">Interviews</p> <ol data-bbox="242 761 608 846" style="list-style-type: none"> 1. PREA Coordinator 2. Medical and Mental Health Staff <p data-bbox="242 875 472 904">Findings (by provision)</p> <p data-bbox="242 934 1453 1095">115.235 (a): Training and personnel records were reviewed by the Auditor and verified that all Medical and Mental Health Staff have received PREA training. The training includes: How to detect and assess signs of sexual abuse and sexual harassment; How to preserve physical evidence of sexual abuse; How to respond effectively and professionally to confinement victims of sexual abuse and sexual harassment; and How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p data-bbox="242 1124 1453 1187">Compliance is based upon the Auditor's review of training and personnel records and verification that Medical and Mental Health Staff have received PREA training. This is supported by interviews with Medical and Mental Health staff.</p> <p data-bbox="242 1216 1441 1279">115.235 (b): N/A, CenterPoint's Medical Staff do not conduct forensic medical exams. Residents are taken to an outside hospital as needed.</p> <p data-bbox="242 1308 1449 1370">115.235 (c): The Auditor reviewed training records and personnel records and verified that all Medical and Mental Health Staff have received PREA training.</p> <p data-bbox="242 1400 1484 1462">Compliance is based upon the Auditor's review of training and personnel records and verification that all Medical and Mental Health Staff have received PREA training.</p> <p data-bbox="242 1491 1485 1554">115.235 (d): All Medical and Mental Health Care Practitioners employed and contracted by facility, and those volunteering at the facility, received training mandated for employees.</p> <p data-bbox="242 1583 1485 1646">Compliance is based upon the Auditor's review of training and personnel records and verification that all Medical and Mental Health Staff have received PREA training.</p> <p data-bbox="242 1675 1489 1738">Evidences used to determine standard compliance includes a review of Medical and Mental Health Staff training records and interviews with the Medical and Mental Health Staff.</p> <p data-bbox="242 1767 1497 1859">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring that Medical and Mental Health Staff employed and contracted by facility, and those volunteering at the facility, received specialized PREA training. No corrective action is required.</p>

115.241	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Vulnerability Assessment Instrument 4. Residents' case files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Site review of living units 2. Intake Office <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion with Residents on the site tour 2. Randomly-selected Residents 3. SOS Caseworker 4. Site Administrator/PREA Coordinator (staff responsible for the Risk Screening) 5. Case Manager <p>Findings (by provision)</p> <p>115.241 (a): CenterPoint has a policy that requires screening upon admission to their facility or transfer to another facility, for risk of sexual abuse victimization or sexual abusiveness toward other residents. The form includes the resident's sexual ID and preference. The facility also updates the resident's information periodically throughout the resident's stay.</p> <p>Compliance with this provision is based upon the Auditor's assessment of the intake process and the screening instrument used, 15 randomly-selected resident case files, and observations during the tour of the facility. This is supported by interviews with randomly-selected residents and the Site Administrator/PREA Coordinator (Staff Responsible for the Risk Screening).</p> <p>115.241 (b): CenterPoint's policy requires that residents be screened within 72 hours of their intake for risk of sexual victimization or risk of sexually abusing other residents. The facility utilizes the PREA Vulnerability Assessment Instrument and enters the information into the Kentucky Offender Management System (KOMS). Of the resident case files reviewed in KOMS, all resident case files contained a risk assessment that had been completed within 72 hours or less, and all cases were completed under the time requirement of the standard. The auditor reviewed 15 randomly-selected resident case files and verified the completed forms.</p> <p>Compliance with this provision is based upon the Auditor's assessment and review of the screening records from the residents' case files. This is supported by an interview with the Site Administrator/PREA Coordinator.</p> <p>115.241 (c): All resident PREA screening assessments are conducted using an objective screening instrument, the PREA Vulnerability Assessment Instrument. The PREA Vulnerability Assessment Instrument objectively ascertains gender nonconforming appearance or manner whether the resident may therefore be vulnerable to sexual abuse. The form does ask residents if they identify as lesbian, gay, bisexual, transgender, or intersex. The information is also collected on the Clinic Assessment. Resident case files were reviewed and verified by the Auditor.</p> <p>Compliance with this provision is based upon the Auditor's assessment of the screening instrument used and review of the screening records from the residents' case files. This is supported by an interview with the Site Administrator/PREA Coordinator.</p> <p>115.241 (d): The PREA Vulnerability Assessment Instrument ascertains gender nonconforming appearance or manner whether the resident may therefore be vulnerable to sexual abuse. The form does ask the residents if they identify as lesbian,</p>

gay, bisexual, transgender, or intersex; prior sexual victimization or abusiveness; current charges and offense history; and the resident's age. The information collected at the Clinic Assessment includes the resident's level of emotional and cognitive development; their physical size and stature; any mental illness or mental disabilities; Intellectual or developmental disabilities; the resident's own perception of vulnerability; and other information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

Compliance with this provision is based upon the Auditor's assessment of the intake process and the screening instrument used and review of the screening records from the residents' case files. This is supported by an interview with the Site Administrator/PREA Coordinator.

115.241 (e): During the PREA screening assessment, the facility considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing residents for risk of being sexually abusive. This necessary information is ascertained through conversations with the resident during the intake process and medical and mental health screenings, during classification assessments, and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's case files.

Compliance with this provision is based upon the Auditor's assessment of the intake process and the screening instrument used and review of the screening records from the residents' case files.

115.241 (f): CenterPoint, by policy, reassesses the placement and programming assignments for each resident at not more than 30 days from the resident's arrival at the facility. They reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

Compliance with this provision was based upon the Auditor's review of the residents' case records and supported by interviews with the Site Administrator/PREA Coordinator and an SOS Caseworker.

115.241 (g): CenterPoint, by policy, reassesses the resident's risk of victimization or abusiveness based upon any referral, request, incident of sexual abuse, or any other additional, relevant information that bears on the resident's risk of sexual safety.

Compliance with this provision was based upon the Auditor's review of the residents' case records and supported by interviews with the Site Administrator/PREA Coordinator, and an SOS Caseworker.

115.241 (h): CenterPoint does not discipline residents for refusing to answer or not disclosing complete information in response to questions on the intake assessment, which would include: related questions regarding whether or not the resident has a mental, physical, or developmental disability; whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; whether or not the resident has previously experienced sexual victimization; and the resident's own perception of vulnerability.

Compliance with this provision is based upon the Auditor's assessment of the intake process and the screening instrument used, review of the screening records from the residents' case files, and observation of the records' storage in both hard copy and electronic forms. This is supported by interviews with randomly-selected residents, the Site Administrator/PREA Coordinator, and the SOS Caseworker.

115.241 (i): CenterPoint has implemented appropriate controls on the dissemination of all sensitive information ascertained at intake. Residents' files are secured and controlled at all times. This was verified by the Auditor's observations. Only the SOS Caseworker, Case Managers, and Site Administrator/PREA Coordinator have access to the residents' Vulnerability Assessment Instrument.

Compliance with this provision is based upon the Auditor's assessment of the intake process and the screening instrument used, review of the screening records from the residents' case files, and observation of the records' storage in both hard copy and electronic forms. This is supported by interviews with randomly-selected residents and with the Site Administrator/PREA Coordinator, a Case Manager, and the SOS Caseworker.

Evidences used to determine standard compliance include the CenterPoint Recovery Program for Men PREA Policy, a review of 15 randomly-selected resident case files, completed and comprehensive resident vulnerability assessment instruments, the Auditor's notes from observation of the residents' intake, and interviews with randomly-selected residents, the Site Administrator/PREA Coordinator, a Case Manager, and the SOS Caseworker.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring that residents be screened for risk of sexual victimization or risk of sexually abusing. No corrective action is required.

115.242	Use of screening information
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 360 358">Documents</p> <ol data-bbox="242 387 1262 584" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Vulnerability Assessment Instrument 4. Residents' case files <p data-bbox="242 613 504 642">Site Review Observations</p> <ol data-bbox="242 672 528 701" style="list-style-type: none"> 1. Site review of living units <p data-bbox="242 730 347 759">Interviews</p> <ol data-bbox="242 788 1070 1043" style="list-style-type: none"> 1. Informal discussion with Residents on the site tour 2. Randomly-selected Residents 3. SOS Caseworker 4. Site Administrator/PREA Coordinator (staff responsible for the Risk Screening) 5. Randomly-selected Staff <p data-bbox="242 1072 472 1102">Findings (by provision)</p> <p data-bbox="242 1131 1481 1328">115.242 (a): CenterPoint uses information from the Vulnerability Assessment Instrument to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse. The living unit bed assignment is made by the resident's Housing Administrator, based upon the information collected in the risk screening. Currently, both dorms and double rooms are being used for resident housing at the facility. The Auditor reviewed 15 of the resident room assignment instruments and they were found to be complete and consistent with the risk assessment screening instrument.</p> <p data-bbox="242 1357 1469 1420">Compliance with this provision was based upon the Auditor's review of residents' case files, observations during the tour of the facility, and interviews with the Site Administrator/PREA Coordinator and randomly-selected residents.</p> <p data-bbox="242 1449 1453 1543">115.242 (b): CenterPoint does make individualized determinations about how to ensure the safety of each resident. Each resident is individually assessed for sexual safety. 15 resident files were reviewed by the Auditor to verify that individual assessment for each resident was completed.</p> <p data-bbox="242 1572 1469 1635">Compliance with this provision was based upon the Auditor's review of residents' case files, observations during the tour of the facility, and interviews with the Site Administrator/PREA Coordinator and randomly-selected residents.</p> <p data-bbox="242 1664 1441 1758">115.242 (c): By policy, CenterPoint making housing or other program assignments for transgender or intersex residents, based upon a case-by-case basis to ensure the resident's health and safety, and whether a placement would present management or security problems.</p> <p data-bbox="242 1787 1489 1850">Compliance with this provision was based upon the Auditor's review of the PREA policy and supported during interviews with the Site Administrator/PREA Coordinator and an SOS Caseworker.</p> <p data-bbox="242 1879 1461 1973">115.242 (d): By policy, CenterPoint would give serious consideration to each transgender or Intersex resident's own views with respect for their safety. In addition, the facility makes housing and program assignments for transgender or intersex residents on a case-by-case basis. Currently and previously, there are no transgender nor intersex residents at the facility.</p> <p data-bbox="242 2002 1474 2065">Compliance with this provision was based upon the Auditor's review of the residents' case files and supported by interviews with the Site Administrator/PREA Coordinator and an SOS Caseworker.</p> <p data-bbox="242 2094 1485 2157">115.242 (e): All residents shower separately from other residents. The facility only has private lockable single use bathrooms with showers for all residents to use. The Auditor verified this by observation of the shower areas and interviews with</p>

randomly-selected staff and residents.

Compliance with this provision was based upon the Auditor's observations during the tour of the facility and interviews with the Site Administrator/PREA Coordinator and randomly-selected staff and residents.

115.242 (f): CenterPoint does not isolate residents for protection from sexual victimization.

Compliance with this provision was based upon the Auditor's review of residents' case files, observations during the tour of the facility, and interviews with the Site Administrator/PREA Coordinator and randomly-selected residents.

Evidences used to determine standard compliance include the CenterPoint's PREA Policy, a review of 15 randomly-selected residents' case files, bed assignment documents, and interviews with randomly-selected staff and residents, the Site Administrator/PREA Coordinator, and an SOS Caseworker.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the proper placement of residents. No corrective action is required.

115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Resident Brochure 4. CenterPoint PREA Informational Posters 5. CenterPoint PREA Investigative Case Files 6. CenterPoint's Website: Four River Behavioral Health (4rbh.org) <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Site review tour of all living units. 2. Site review tour of all common areas <p>Interviews</p> <ol style="list-style-type: none"> 1. Informal discussion with staff and resident during site tour 2. Site Administrator 3. PREA Coordinator 4. Randomly-selected Staff 5. Randomly-selected Residents <p>Findings (by provision)</p> <p>115.251(a): CenterPoint provides multiple ways for residents to internally report sexual abuse or sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect, or violation of responsibilities that may have contributed to such incidents. This could include, but is not limited to, the following: a grievance form, third parties reporting form, direct verbal reporting to any staff member, and/or calling the abuse hotline number. Phones are accessible in the common areas to the residents, or by staff request to use the phone to make a hot line request during times or situations when the common area phone is not accessible.</p> <p>Compliance with this provision was confirmed by the Auditor's personal observations and by interviews with randomly-selected staff and residents.</p> <p>115.251 (b): CenterPoint residents can report sexual abuse or sexual harassment to a public or private entity or office that is not part of the facility via the PREA Hotline, 1-833-362-7732, which allows the resident to remain anonymous upon request. This hotline is monitored by the Kentucky Justice & Public Safety Cabinet's Internal Investigations Branch. Investigative reports reviewed by the Auditor indicate that reports of sexual abuse and harassment were received through a variety of methods, and regardless of the method received, were handled expeditiously. Investigations were initiated on the date staff were made aware. Test calls made by the Auditor through the hotline from the resident phone system were forwarded to the agency's PREA Coordinator within a short time after the call was made.</p> <p>Compliance with this provision was confirmed by the Auditor's personal observations and by interviews with randomly-selected residents.</p> <p>115.251 (c): CenterPoint staff members are required to accept reports of sexual abuse and sexual harassment that are made verbally, in writing, anonymously, and from third parties, and promptly document any verbal reports. Staff are to report these allegations directly to the Site Administrator or designee.</p> <p>Compliance with this provision was confirmed by interviews with randomly-selected staff and residents and a review of the PREA investigative case files.</p>

115.251 (d): Per the facility PREA Policy, staff are able to report directly to their Shift Supervisor, the Site Administrator, and the PREA Coordinator, or privately report a sexual abuse or sexual harassment of residents via the PREA hotline.

Compliance with this standard is supported by a review of the PREA Policy and interviews with randomly-selected staff.

Evidences used by the Auditor to determine compliance with the standard include review of the facility's PREA Policy and the facility's website, investigative case files, observations of reporting information during the site tour; and interviews with randomly-selected staff, randomly-selected residents, and the Site Administrator/PREA Coordinator.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring third-party reports of sexual abuse and sexual harassment. No corrective action is required.

115.252	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. Residents' grievance files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Resident Grievance Forms <p>Interviews</p> <ol style="list-style-type: none"> 1. Randomly-selected Residents 2. Randomly-selected Staff 3. PREA Coordinator 4. Site Administrator <p>Findings (by provision)</p> <p>115.252 (a): CenterPoint has an administrative procedure for dealing with resident grievances regarding sexual abuse. Therefore, the facility is not exempt from this standard. The administrative procedure is the "Grievance Process" and information about how to utilize the grievance process is provided during intake as part of the Client Rights.</p> <p>Compliance with this provision was confirmed by the Auditor's personal observations and by interviews with randomly-selected residents and the Site Administrator/PREA Coordinator.</p> <p>115.252 (b): CenterPoint permits residents to submit a grievance regarding an allegation of sexual abuse without any type of time limit and does not require an informal grievance process to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.</p> <p>Compliance with this provision is supported by interviews with randomly-selected residents and the Site Administrator/PREA Coordinator.</p> <p>115.252 (c): The CenterPoint Clients Rights document allows a resident who alleges sexual abuse to submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance is not referred to a staff member who is the subject of the complaint. Residents have free access to grievance forms in each living unit and can submit it to any member of the management staff.</p> <p>Compliance with this provision is supported by interview with the Site Administrator/PREA Coordinator.</p> <p>115.252 (d): CenterPoint issues 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. By policy, the facility would issue a final decision within 6 days and therefore an extension request would not be needed. Also, at no time should a resident consider the absence of a response to be a denial as the facility would response to the grievance.</p> <p>Compliance with this provision is based upon the Auditor's review of the residents' grievance files and is supported by an interview with the Site Administrator/PREA Coordinator.</p> <p>115.252 (e): The CenterPoint Clients Rights document permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing grievances. Residents can decline third-party assistance. There were zero (0) grievances alleging sexual abuse filed by residents or filed with third party assistance in the past 12 months.</p> <p>Compliance with this provision is based upon the Auditor's review of the residents' grievance files and is supported by an interview with the Site Administrator/PREA Coordinator.</p>

115.252 (f): The CenterPoint Clients Rights document allows for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. The policy requires an initial response within 72 hours and a final agency decision within 6 days. The agency reported that there were zero (0) emergency grievance alleging substantial risk of imminent sexual abuse filed in the past 12 months.

Compliance with this provision is based upon the Auditor's review of the residents' grievance files and is supported by an interview with the Site Administrator/PREA Coordinator.

115.252 (g): CenterPoint procedures allow the facility to discipline a resident for filing a grievance alleging sexual abuse where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, no residents' grievances alleging sexual abuse were filed that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith.

Compliance with this provision is based upon the Auditor's review of the residents' grievance files and is supported by an interview with the Site Administrator/PREA Coordinator.

Evidences used to determine standard compliance include a review of CenterPoint Grievance process, the residents' grievance files, and interviews with randomly-selected staff, randomly-selected residents, and the Site Administrator/PREA Coordinator.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the exhaustion of administrative remedies. No corrective action is required.

115.253	Resident access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. CenterPoint PREA Brochure 4. CenterPoint MOU with the Lotus Children's Advocacy & Sexual Violence Center (4/30/21) <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. Resident's Visitation room <p>Interviews</p> <ol style="list-style-type: none"> 1. Randomly-selected Residents 2. PREA Coordinator 3. Site Administrator <p>Findings (by provision)</p> <p>115.253 (a): The facility utilizes the Lotus Children's Advocacy & Sexual Violence Center for outside advocacy services for resident victims when needed. They have established a contact at the agency who the facility can contact directly when there is a need to access services. Contact information is available to residents in common areas of the facility. Lotus Children's Advocacy & Sexual Violence Center was contacted by the Auditor and found to be acceptable. The facility allows reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible.</p> <p>The compliance determination with this provision was based on review of the resident PREA education material and interviews with randomly-selected residents and the Site Administrator/PREA Coordinator.</p> <p>115.253 (b): CenterPoint informs the 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. CenterPoint policy requires all staff to immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in any facility, retaliation against residents or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This policy was supported by interviews with randomly-selected residents and the Site Administrator/PREA Coordinator.</p> <p>Compliance with this provision was supported by interviews with randomly-selected residents and the Site Administrator/PREA Coordinator.</p> <p>115.253 (c): CenterPoint does have an MOU request with a sexual assault response's advocacy community service provider, the Lotus Children's Advocacy & Sexual Violence Center, to provide residents with confidential emotional support services related to sexual abuse. The facility maintains a copy of this agreement.</p> <p>Compliance determination with this provision was based upon a review of the facility's MOU with the Lotus Children's Advocacy & Sexual Violence Center and interview with the Site Administrator/PREA Coordinator.</p> <p>The final analysis of the evidence indicates that CenterPoint has a policy providing residents with access to outside confidential support services and legal representation that is consistent with the requirements of this PREA standard. CenterPoint does have an MOU with a sexual assault response's advocacy community service provider, Lotus Children's Advocacy & Sexual Violence Center.</p> <p>Based upon this analysis, the Auditor finds the facility is substantially compliant with this standard. No corrective action is required.</p>

115.254	Third party reporting
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 360 358">Documents</p> <ol data-bbox="242 387 1265 528" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. CenterPoint's Website: Four River Behavioral Health (4rbh.org) <p data-bbox="242 557 504 586">Site Review Observations</p> <ol data-bbox="242 616 491 645" style="list-style-type: none"> 1. Facility's Main Lobby <p data-bbox="242 674 347 703">Interviews</p> <ol data-bbox="242 732 588 873" style="list-style-type: none"> 1. PREA Coordinator 2. Site Administrator 3. Randomly-selected Residents <p data-bbox="242 902 472 931">Findings (by provision)</p> <p data-bbox="242 960 1490 1155">115.254 (a): CenterPoint accepts all verbal, written, and anonymous reports of sexual abuse and sexual harassment, from any source including third parties. Documentation, staff interviews, and resident interviews confirmed that the facility provides methods to receive third-party reports of any resident sexual harassment/sexual abuse and publicly distributes the information on how to report sexual harassment/sexual abuse on behalf of others. PREA posters are posted throughout the facility for residents and staff information. Residents have access to family members and probation/parole officers. Third-party reporting forms are available to visitors in the Lobby area of the facility and as a PDF form on the facility's website.</p> <p data-bbox="242 1184 1453 1247">Compliance with this provision was supported by a review of the facility's PREA Policy, the facility's website, observations during the site tour, and interviews with randomly-selected residents and the Site Administrator/PREA Coordinator.</p> <p data-bbox="242 1276 1495 1339">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring third-party reports of sexual abuse and sexual harassment. No corrective action is required.</p>

115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. Kentucky Department of Corrections' (KDOC) website :Prison Rape Elimination Act (PREA) - Department of Corrections (ky.gov) 4. CenterPoint PREA Investigative Case Files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Randomly-selected Staff 2. PREA Coordinator 3. Site Administrator 4. Medical Staff 5. Mental Health Staff <p>Findings (by provision)</p> <p>115.261 (a): CenterPoint policy requires all staff to immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in any facility, retaliation against residents or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Compliance with this provision was supported by interviews with randomly-selected staff and the Site Administrator/PREA Coordinator.</p> <p>115.261 (b): CenterPoint 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.</p> <p>Compliance with this provision was supported by interviews with the Site Administrator/PREA Coordinator and randomly-selected staff.</p> <p>115.261 (c): CenterPoint policy requires all Medical and Mental Health Staff to immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in any facility. This policy was supported by Medical and Mental Health staff interviews.</p> <p>Compliance with this provision was supported by interviews with Medical and Mental Health staff and the Site Administrator/PREA Coordinator.</p> <p>115.261 (d): CenterPoint does not house residents under the age of 18. However, If the alleged victim is considered a vulnerable adult under a State or local vulnerable persons statute, the Site Administrator/PREA Coordinator would promptly report the allegation to the alleged victim's parents or to the legal guardian if the alleged victim is under the guardianship of the child welfare system. The Site Administrator/PREA Coordinator would also report the allegation to the alleged victim's parole officer.</p> <p>Compliance with this provision is supported by an interview with the Site Administrator/PREA Coordinator and a review of investigation reports.</p> <p>115.261 (e): CenterPoint reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators who then report it to the Kentucky Department of Corrections (KDOC) via the</p>

PREA Hotline.

Compliance for this provision was supported by interviews with the Site Administrator/PREA Coordinator and a review of investigation reports.

Evidences used to determine standard compliance includes a review of investigative case files and interviews with randomly-selected staff, Medical and Mental Health staff, and the Site Administrator/PREA Coordinator.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring staff and agency reporting duties. No corrective action is required.

115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Randomly-selected Staff 2. Case Managers 3. Divisional Director 4. Site Administrator 5. PREA Coordinator <p>Findings (by provision)</p> <p>115.262 (a): The CenterPoint PREA Policy states that "when it learns that a resident is subject to a substantial risk of imminent sexual abuse, it will take immediate action to protect the resident." There have been no determinations that a resident was subject to a substantial risk of imminent sexual abuse in the past 12 months. The policy is consistent with the standard.</p> <p>Compliance for this provision was supported by interviews with the Divisional Director, Site Administrator/PREA Coordinator, Case Managers, and randomly-selected staff.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring agency protection duties. No corrective action is required.</p>

115.263	<p>Reporting to other confinement facilities</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interview</p> <ol style="list-style-type: none"> 1. Site Administrator <p>Findings (by provision)</p> <p>115.263 (a): CenterPoint Policy requires that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the Site Administrator must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The facility received zero (0) allegations in the past 12 months that a resident was abused while confined at another facility.</p> <p>Compliance with this provision is supported by policy and interview with the Site Administrator.</p> <p>115.263 (b): By policy, the Site Administrator would notify the facility where the alleged abuse occurred via an immediate telephone call, following up within 24 hours with an email. None yet needed or recorded.</p> <p>Compliance with this provision is supported by policy and interview with the Site Administrator.</p> <p>115.263 (c): By policy, the Site Administrator would document that such notification was provided within 72 hours of receiving the allegation that a resident was abused while confined at another facility. The facility received zero (0) allegations in the past 12 months that a resident was abused while confined at another facility. Therefore, no documentation for such notification exists to verify.</p> <p>Compliance with this provision is supported by policy and interview with the Site Administrator.</p> <p>115.263 (d): By policy, the Site Administrator would follow up by email to ensure that the allegations were appropriately investigated.</p> <p>Compliance of this standard was determined by policy review and by interview with the Site Administrator.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring facility's official response duties. No corrective action is required.</p>
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115.264	Staff first responder duties
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 359 358">Documents</p> <ol data-bbox="242 387 1262 472" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act <p data-bbox="242 501 504 530">Site Review Observations</p> <ol data-bbox="242 560 320 589" style="list-style-type: none"> 1. N/A <p data-bbox="242 618 347 647">Interviews</p> <ol data-bbox="242 676 675 815" style="list-style-type: none"> 1. Randomly-selected Staff 2. Staff First Responders 3. Resident who reported a sexual abuse <p data-bbox="242 844 472 873">Findings (by provision)</p> <p data-bbox="242 902 1461 1032">115.264 (a): CenterPoint Policy requires the first responder to an alleged resident sexual abuse incident to separate the alleged victim from the abuser, preserve and protect the crime scene, and ensure the victim and the abuser don't destroy evidence. This policy and procedure were supported by interviews of staff first responders who all answered the questions consistently with the facility policy.</p> <p data-bbox="242 1061 1461 1122">Compliance with this provision was supported by policy review and interviews with a Staff First Responder and a Resident who reported a sexual abuse.</p> <p data-bbox="242 1151 1485 1247">115.264 (b): All staff are trained as first responders to ensure that alleged victims do not destroy any physical evidence. This policy was confirmed by the Staff First Responder interviewed, who stated that they would request that the alleged victim not take any actions that could destroy physical evidence, and then notify Security Staff.</p> <p data-bbox="242 1276 1452 1337">Compliance with this provision was supported by policy review and interviews with a Staff First Responder and randomly-selected staff.</p> <p data-bbox="242 1366 1497 1426">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring staff first responder duties. No corrective action is required.</p>

115.265	Coordinated response
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. Coordinated Response Procedures <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Shift Supervisors 2. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.265 (a): CenterPoint has developed a written institutional plan to coordinate actions among staff first responders, Medical and Mental Health Staff, investigators, and facility leadership for response to an incident of sexual abuse.</p> <p>Compliance with this provision was confirmed by interviews with the Site Administrator/PREA Coordinator and the Shift Supervisors and a review of the Coordinated Response Procedures.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring coordinated response. No corrective action is required.</p>

115.266	<p>Preservation of ability to protect residents from contact with abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. Employee Records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Divisional Director 2. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.266 (a): There is no collective bargaining agreements at CenterPoint 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. Nothing in the facility's policies inhibits the facility's ability to protect residents from contact with abusers. This was verified by interviews with the Divisional Director and the Site Administrator/PREA Coordinator.</p> <p>Compliance with this standard was determined by reviewing the facility's employment records and by interviews with the Divisional Director and the Site Administrator/PREA Coordinator.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring preservation of ability to protect residents from contact with abusers. No corrective action is required.</p>
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115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1026 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 387 1262 528" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint's PREA Investigative Files <p data-bbox="240 560 504 586">Site Review Observations</p> <ol data-bbox="240 616 320 642" style="list-style-type: none"> 1. N/A <p data-bbox="240 674 347 701">Interviews</p> <ol data-bbox="240 730 464 987" style="list-style-type: none"> 1. Divisional Director 2. Case Managers 3. Site Administrator 4. PREA Coordinator 5. Shift Supervisors <p data-bbox="240 1019 472 1046">Findings (by provision)</p> <p data-bbox="240 1077 1474 1202">115.267 (a): CenterPoint 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 facility has designated its Site Administrator as the person charged with monitoring retaliation from staff-to-staff and staff-to-residents. Resident-to-resident retaliation is monitored by the Case Managers and the Site Administrator/PREA Coordinator.</p> <p data-bbox="240 1234 1437 1294">Compliance with this standard was determined by a review of the facility's investigative policy and by interviews with the Divisional Director, the Case Manager, and the Site Administrator/PREA Coordinator.</p> <p data-bbox="240 1326 1477 1485">115.267 (b): CenterPoint employs multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Such measures include housing changes, transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services. No documentation of protective measures exists as there has not been any reported fears of retaliation from residents or staff.</p> <p data-bbox="240 1516 1485 1576">Compliance with this standard was determined by a review of the facility's PREA investigative files and by interviews with the Site Administrator/PREA Coordinator and Shift Supervisors.</p> <p data-bbox="240 1608 1469 1702">115.267 (c): CenterPoint monitors 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. The facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. No incidents of retaliation occurred in the past 12 months.</p> <p data-bbox="240 1733 1485 1794">Compliance with this standard was determined by a review of the facility's PREA investigative files and by interviews with the Site Administrator/PREA Coordinator and Shift Supervisors.</p> <p data-bbox="240 1825 1398 1886">115.267 (d): CenterPoint 's retaliation monitoring includes periodic status checks of residents based upon policy and according to the Site Administrator/PREA Coordinator.</p> <p data-bbox="240 1917 1485 1977">Compliance with this standard was determined by a review of the facility's PREA investigative files and by interviews with the Site Administrator/PREA Coordinator and Shift Supervisors.</p> <p data-bbox="240 2009 1477 2134">115.267 (e): CenterPoint, by policy, monitors the conduct and treatment of other individuals who cooperate with an investigation for expression of a fear of retaliation and take appropriate measures to protect that individual against retaliation to see if there are changes that may suggest possible retaliation by residents or staff. No incidents of retaliation occurred in the past 12 months.</p>

Compliance with this provision was determined by a review of the facility's PREA investigative files and by interviews with the Divisional Director and the Site Administrator/PREA Coordinator.

115.267 (f): Auditor is not required to audit this provision.

Evidences used to determine standard compliance include a review of PREA investigative files and interviews of the Divisional Director, Site Administrator/PREA Coordinator, Case Managers, and Shift Supervisors.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring agency protection against retaliation. No corrective action is required.

115.271	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Investigative files 4. Investigative Staff's training records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigative Staff 2. PREA Coordinator 3. Site Administrator <p>Findings (by provision)</p> <p>115.271 (a): CenterPoint has a policy for administrative investigations of all allegations of sexual abuse and harassment. Based upon the Auditors review of all the investigations of sexual abuse and harassment reports, they were done promptly, thoroughly, and objectively.</p> <p>Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and the Auditor's review of PREA investigative reports.</p> <p>115.271 (b): CenterPoint uses two investigators who has received specialized training in sexual abuse investigations. The Auditor reviewed the training record of the sexual abuse investigators and the facility's specialized sexual abuse investigator's training program, PREA: Investigating Sexual Abuse in a Confinement Setting, and deemed it acceptable.</p> <p>Compliance with this provision was verified by interviews with the Investigative Staff and the Auditor's review of the Investigative Staff's training record.</p> <p>115.271 (c): CenterPoint conducts administrative investigations only. The facility's investigators do not gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence. However, they would gather and preserve any available electronic monitoring data. They would interview alleged victims, suspected perpetrators, and witnesses and also review prior complaints and reports of sexual abuse involving the suspected perpetrator.</p> <p>Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and review of the PREA investigative reports.</p> <p>115.271 (d): CenterPoint refers sex abuse cases for criminal investigation when the quality of evidence appears to support criminal prosecution. This was supported by review of investigative reports and interviews of the Investigative Staff. CenterPoint does not conduct compelled interviews; it would be beyond the scope of their authority.</p> <p>Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and review of the PREA investigative reports.</p> <p>115.271 (e): CenterPoint 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 a resident or staff. The facility does not use polygraphs in any form for determining a resident's credibility.</p> <p>Compliance with this provision was verified by interviews with the Investigative Staff and review of the PREA investigative reports.</p> <p>115.271 (f): CenterPoint administrative investigations include an effort to determine whether staff actions or failures to act</p>

contributed to the abuse. Administrative investigations are 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.

Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and review of the PREA investigative reports.

115.271 (g): N/A; CenterPoint does not conduct criminal investigations. This was supported by interviews of Investigative Staff, review of the administrative investigative reports, and review of the facility's PREA policy.

115.271 (h): CenterPoint appears to refer all substantiated allegations of sexual misconduct or abuse that appear to be criminal for prosecution. No allegations of conduct that appear to be criminal were referred for prosecution in the last 12 months. Kentucky State Police would conduct the criminal investigation.

Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and review of the PREA investigative reports.

115.271 (i): CenterPoint retains 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.

Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and review of the PREA investigative reports.

115.271 (j): CenterPoint appears to 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.

Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and review of the PREA investigative reports.

115.271 (k): Auditor is not required to audit this provision.

115.271 (l): When an outside entity investigates sexual abuse, CenterPoint appears to provide full cooperation to outside investigators and endeavors to remain informed of the investigation's progress.

Compliance with this provision was verified by interviews with the Site Administrator, the PREA Coordinator, and Investigative Staff.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring criminal and administrative agency investigations. No corrective action is required.

115.272	<p>Evidentiary standard for administrative investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Investigation Files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigative Staff 2. PREA Coordinator 3. Site Administrator <p>Findings (by provision)</p> <p>115.272 (a): CenterPoint does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. CenterPoint has a comprehensive PREA policy and procedures that state the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator and the Auditor's review of PREA investigative reports.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring evidentiary standards of no higher than a preponderance of the evidence for administrative investigations. No corrective action is required.</p>
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115.273	Reporting to residents
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 389 1262 586" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Investigative files 4. Residents' case files <p data-bbox="240 618 504 645">Site Review Observations</p> <ol data-bbox="240 676 320 703" style="list-style-type: none"> 1. N/A <p data-bbox="240 734 347 761">Interviews</p> <ol data-bbox="240 792 780 931" style="list-style-type: none"> 1. Investigative Staff 2. Site Administrator/PREA Coordinator 3. Resident who previously reported a sexual abuse <p data-bbox="240 963 472 990">Findings (by provision)</p> <p data-bbox="240 1021 1490 1182">115.373 (a): CenterPoint has a comprehensive policy that requires any resident who makes an allegation of having suffered sexual abuse to be informed verbally and in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. There was no alleged sexual abuse on sexual harassment investigations completed in the past 12 months. The policy would require the residents to be notified verbally and in writing of the results of the investigation at the completion of the investigation.</p> <p data-bbox="240 1214 1445 1272">Compliance with this provision was verified by interviews with the Site Administrator/PREA Coordinator and Investigative Staff and a review of the facility's PREA Policy and the PREA investigative files.</p> <p data-bbox="240 1303 1469 1361">115.373 (b): The facility only conducts administrative investigations. More information is requested from the Kentucky State Police as needed to inform the residents.</p> <p data-bbox="240 1393 1410 1451">Compliance with this provision was verified by interviews with the Investigative Staff and the Site Administrator/PREA Coordinator and a review of the facility's PREA investigative files.</p> <p data-bbox="240 1482 1477 1644">115.373 (c): CenterPoint does subsequently inform a resident, following a substantiated or unsubstantiated resident's allegation that a staff member has committed sexual abuse against the resident, that the staff member is no longer posted within the resident's unit; the staff member is no longer employed at the facility; the agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility; or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="240 1675 1434 1733">Compliance with this provision was verified by interview with the Site Administrator/PREA Coordinator and the Auditor's review of the facility's PREA investigative files and the facility's PREA Policy.</p> <p data-bbox="240 1765 1450 1823">115.373 (d): CenterPoint, by policy, informs the resident victim when it learns that an alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="240 1854 1445 1912">Compliance with this provision was verified by interviews with a resident who previously reported a sexual abuse and the Site Administrator/PREA Coordinator and a review of the facility's PREA investigative files and the facility's PREA Policy.</p> <p data-bbox="240 1944 1453 2002">115.373 (e): CenterPoint documents all such notifications or attempted notifications described in this standard. A resident who previously reported a sexual abuse was notified of the results of the outcome, verbally and in writing.</p> <p data-bbox="240 2033 1434 2092">Compliance with this provision was verified by interview with the Site Administrator/PREA Coordinator and the Auditor's review of residents' case files and the PREA investigative files.</p> <p data-bbox="240 2123 810 2150">115.373 (f): Auditor is not required to audit this provision.</p>

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring reporting to residents. No corrective action is required.

115.276	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint's PREA Investigative files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Investigative Staff 2. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.276 (a): CenterPoint's PREA Policy states that staff are subject to disciplinary sanctions up to and including termination for violating CenterPoint's sexual abuse or sexual harassment policies.</p> <p>Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of CenterPoint's PREA policy.</p> <p>115.276 (b): By policy, termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The facility has not terminated staff, or had staff resign prior to termination, for violating the agency's sexual abuse or sexual harassment policies in the past 12 months.</p> <p>Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator.</p> <p>115.276 (c): There is no record of discipline against facility staff for violations of the agency's sexual abuse or sexual harassment policies in the past 12 months. The facility's disciplinary sanction 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.</p> <p>Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator.</p> <p>115.276 (d): No facility staff were terminated or resigned (who would have been terminated if they hadn't resigned) in the past 12 months for violations of agency sexual abuse or sexual harassment policies. By policy, CenterPoint would report sexual abuse or sexual harassment violations to law enforcement (unless clearly not criminal) and any relevant licensing bodies.</p> <p>Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and review of PREA Investigative reports.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring disciplinary sanctions for staff. No corrective action is required.</p>

115.277	<p>Corrective action for contractors and volunteers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint's PREA Investigative Files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.277 (a): CenterPoint does not employ any contractor or volunteers. There was no documented referral to law enforcement in the past 12 months for any incident of a contractor or volunteer engaging in sexual abuse with residents.</p> <p>Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of CenterPoint's PREA policy and PREA Investigative files.</p> <p>115.277 (b):CenterPoint does not employ any contractor or volunteers. There was no documented case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer in the past 12 months.</p> <p>Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of CenterPoint's PREA policy and PREA Investigative files.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring corrective action for contractors and volunteers. No corrective action is required.</p>
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115.278	Disciplinary sanctions for residents
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 389 1262 586" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint's PREA Investigative files 4. Residents' case files <p data-bbox="240 618 504 645">Site Review Observations</p> <ol data-bbox="240 676 320 703" style="list-style-type: none"> 1. N/A <p data-bbox="240 734 347 761">Interviews</p> <ol data-bbox="240 792 639 819" style="list-style-type: none"> 1. Site Administrator/PREA Coordinator <p data-bbox="240 851 472 878">Findings (by provision)</p> <p data-bbox="240 909 1485 1034">115.278 (a): CenterPoint residents may be subject to disciplinary sanctions, by policy, 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. The resident may be subject to disciplinary sanctions but only pursuant to a formal disciplinary process. This policy was confirmed by interview with the Site Administrator/PREA Coordinator.</p> <p data-bbox="240 1066 1437 1124">Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of CenterPoint's PREA Policy.</p> <p data-bbox="240 1155 1453 1312">115.278 (b): In the past 12 months, there has been no administrative findings nor criminal findings of guilt for resident-on-resident sexual abuse that have occurred at this facility. By policy, sanctions are 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 This was supported by interview with the Site Administrator/PREA Coordinator and the Auditor's review of residents' case files.</p> <p data-bbox="240 1344 1437 1402">Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of residents' case files.</p> <p data-bbox="240 1433 1477 1559">115.278 (c): Based upon CenterPoint's PREA Policy, the disciplinary process does consider whether a resident's mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed. This was supported by interviews with the Site Administrator/PREA Coordinator and the Auditor's review of PREA investigative files.</p> <p data-bbox="240 1590 1437 1648">Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of PREA investigative files.</p> <p data-bbox="240 1680 1485 1872">115.278(d): CenterPoint offers therapy, counseling, and other interventions designed to address and correct the underlying reasons or motivations for abuse. The Site Administrator/PREA Coordinato states they offer Domestic Violence Classes and outside counseling for issues of abuse and does consider whether to offer the offending resident participation in such interventions. The program may require participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition of access to general programming or education.</p> <p data-bbox="240 1904 1437 1962">Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of residents' case files.</p> <p data-bbox="240 1993 1493 2119">115.278 (e): CenterPoint's PREA Policy states that the facility may discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact. There was no record of disciplinary action against residents for sexual conduct with staff in the last 12 months. CenterPoint's PREA Policy and this information were confirmed by interview with the Site Administrator/PREA Coordinator.</p>

Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of residents' case files.

115.278 (f): CenterPoint, by policy, prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred. This policy was confirmed by interview with the Site Administrator/PREA Coordinator.

Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of CenterPoint's PREA Policy.

115.278 (g): CenterPoint, by policy, prohibits all sexual activity between residents and deems any such activity to constitute sexual abuse only if it determines that the activity is coerced. This policy was confirmed by interview with the Site Administrator/PREA Coordinator.

Compliance with this provision was confirmed by interview with the Site Administrator/PREA Coordinator and a review of CenterPoint's PREA Policy.

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring interventions and disciplinary sanctions for residents. No corrective action is required.

115.282	Access to emergency medical and mental health services
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 389 1262 470" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act <p data-bbox="240 501 504 528">Site Review Observations</p> <ol data-bbox="240 560 320 586" style="list-style-type: none"> 1. N/A <p data-bbox="240 618 347 645">Interviews</p> <ol data-bbox="240 676 724 873" style="list-style-type: none"> 1. Medical and Mental Health Staff 2. Resident who reported a prior sexual abuse 3. Security Staff 4. Site Administrator/PREA Coordinator <p data-bbox="240 904 472 931">Findings (by provision)</p> <p data-bbox="240 963 1442 1057">115.282 (a): CenterPoint, by policy, provides resident victims of sexual abuse timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by Medical and Mental Health Staff according to their professional judgment.</p> <p data-bbox="240 1088 1442 1146">Compliance with this provision was supported by interviews with the Medical and Mental Health Staff and a resident who reported a prior sexual abuse.</p> <p data-bbox="240 1178 1453 1272">115.282 (b): When Medical and Mental Health Staff are not on duty and a facility learns that a resident is subject to a substantial risk of imminent sexual abuse, first responders take preliminary steps to protect the victim and the appropriate Medical and Mental Health Staff are immediately notified.</p> <p data-bbox="240 1303 1474 1330">Compliance with this provision was supported by interviews with the Security Staff and the Medical and Mental Health Staff.</p> <p data-bbox="240 1361 1449 1456">115.282 (c): By policy, CenterPoint offers resident victims of sexual abuse timely information about and timely access to emergency sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care and where medically appropriate.</p> <p data-bbox="240 1487 1251 1514">Compliance with this provision was supported by interviews with the Medical and Mental Health Staff.</p> <p data-bbox="240 1545 1485 1603">115.282 (d): CenterPoint provides treatment services 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.</p> <p data-bbox="240 1635 1369 1693">Compliance with this provision was supported by interviews with the Medical and Mental Health staff and the Site Administrator/PREA Coordinator.</p> <p data-bbox="240 1724 1497 1783">Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring access to emergency medical and mental health services. No corrective action is required.</p>

115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. Residents' medical records <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Medical and Mental Health Staff 2. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.283 (a): CenterPoint, by policy, offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p>Compliance for this provision was determined and supported by interviews with the Medical and Mental Health Staff.</p> <p>115.283 (b): CenterPoint's evaluation and treatment of victims does 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.</p> <p>Compliance for this provision was supported by interviews with the Medical and Mental Health Staff.</p> <p>115.283 (c): CenterPoint, by policy, provides such victims with medical and mental health services consistent with the community level of care.</p> <p>Compliance for this this provision was determined by the Auditor's review of residents' medical records and interviews with the Medical and Mental Health Staff.</p> <p>115.283 (d): This provision is not applicable. CenterPoint is a male only facility.</p> <p>115.283 (e): This provision is not applicable. CenterPoint is a male only facility.</p> <p>115.283 (f): By policy, CenterPoint offers tests for sexually transmitted infections, as medically appropriate, to resident victims of sexual abuse while incarcerated.</p> <p>Compliance determination of this provision was supported by interviews with the Medical and Mental Health Staff and the Auditor's review of CenterPoint's PREA policy.</p> <p>115.283 (g): CenterPoint provides treatment services 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.</p> <p>Compliance determination of this provision was supported by interviews with the Medical and Mental Health Staff and the Auditor's review of CenterPoint's PREA policy.</p> <p>115.283 (h): CenterPoint 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 Medical and Mental Health Staff.</p> <p>Compliance determination of this provision was supported by the Auditor's review of residents' medical records and interviews with the Medical and Mental Health Staff.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant</p>

with this standard requiring ongoing medical and mental health care for sexual abuse victims and abusers. No corrective action is required.

115.286	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. The CenterPoint Recovery Program for Men Post PREA Investigation Sexual Abuse Incident Review Report 4. CenterPoint PREA Investigative Files <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.286 (a): CenterPoint conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation. In 2020, there were no allegations of sexual abuse nor sexual harassment. As per CenterPoint's PREA Policy, the facility would conduct an incident review on all sexual abuse reports, whether they were determined to be unsubstantiated or substantiated. The Site Administrator/PREA Coordinator states that sexual abuse incident reviews would be conducted following the conclusion of a sexual abuse investigation and have been conducted in past years.</p> <p>Compliance was determined by a review of the Sexual Abuse Incident Review Report and an interview with the Site Administrator/PREA Coordinator.</p> <p>115.286 (b): By policy, CenterPoint would conduct sexual abuse incident reviews within 30 days of the conclusion of a sexual abuse investigation. There were no allegations of sexual abuse or sexual harassment reported within the past 12 months.</p> <p>Compliance was confirmed by interview with the Site Administrator/PREA Coordinator and a review of the PREA investigative files.</p> <p>115.286 (c): The Sexual Abuse Incident Review Team includes the Divisional Director and the Site Administrator/PREA Coordinator. The Sexual Abuse Incident Review Team reviews all sexual abuse incidents and allows for input from line supervisors, investigators, and the Medical and Mental Health Staff.</p> <p>Compliance was confirmed by interviews with the Site Administrator/PREA Coordinator and review of PREA investigative files.</p> <p>115.286 (d): The facility prepares a report of its findings from sexual abuse incident reviews and submits a completed Sexual Abuse Incident Review Report to the Divisional Director within 30 days of the conclusion of an investigation.</p> <p>Compliance was confirmed by interviews with the Site Administrator/PREA Coordinator and review of PREA investigative files.</p> <p>115.286 (e): CenterPoint implements recommendations for improvement or documents its reasons for not doing so. The facility prepares a report of its findings, including but not necessarily limited to, determinations made and any recommendations for improvement. The report is submitted to the Divisional Director.</p> <p>Compliance was confirmed by interviews with the Site Administrator/PREA Coordinator and review of PREA investigative files.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring sexual abuse incident reviews. No corrective action is required.</p>

115.287	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint Annual PREA Report 4. CenterPoint Sexual Offense Report Form 5. CenterPoint Incident Reports <p>Review Report.</p> <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.287 (a): CenterPoint collects accurate, uniform data for every allegation of sexual abuse at the facility under its direct control using a standardized instrument and set of definitions.</p> <p>Compliance with this provision was determined based upon review of all incident reports for the prior 12-month reporting period and an interview with the Site Administrator/PREA Coordinator.</p> <p>115.287 (b): The Site Administrator/PREA Coordinator stated that CenterPoint does aggregate the incident-based sexual abuse data annually. The Auditor reviewed the facility's Annual PREA Report on the facility's website and aggregated sexual abuse data is included in the Annual PREA Report. The Annual PREA Report on the facility's website contains 2020 data and also includes aggregated data from the previous 4 years.</p> <p>Compliance with this provision was determined based upon review of the Annual PREA Report as published on the facility's website and an interview with the Site Administrator/PREA Coordinator.</p> <p>115.287 (c): CenterPoint's incident-based data in the CenterPoint Sexual Offense Report Form includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p>Compliance with this provision was determined based upon the Auditor's review of the CenterPoint Sexual Offense Report Form and an interview with the Site Administrator/PREA Coordinator.</p> <p>115.287 (d): CenterPoint maintains and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p>Compliance with this provision was determined based upon review of completed CenterPoint Sexual Offense Report Forms and an interview with the Site Administrator/PREA Coordinator.</p> <p>115.287 (e): N/A; CenterPoint does not contract for the confinement of its residents.</p> <p>115.287 (f): N/A; DOJ has not requested agency data.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is compliant with this standard requiring data collection of sexual abuse incidents. No corrective action is required.</p>

115.288	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men. 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act. 3. CenterPoint PREA Annual Report 4. CenterPoint's Website: Center Point - Four River Behavioral Health <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Site Administrator/PREA Coordinator 2. Divisional Director <p>Findings (by provision)</p> <p>115.288 (a): CenterPoint claims to review 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. The information is included in its published PREA Annual Report.</p> <p>Compliance for this provision was supported by interview with the Site Administrator/PREA Coordinator and a review of the PREA Annual Report.</p> <p>115.288 (b): The facility's PREA Annual Report does include a comparison of the current year's data and corrective actions with those from prior years.</p> <p>Compliance for this provision was supported by interview with the Site Administrator/PREA Coordinator and a review of the PREA Annual Report.</p> <p>115.288 (c): CenterPoint makes its PREA Annual Report readily available to the public, at least annually, through its website and the PREA Annual Report is approved by the Divisional Director. Kentucky DOC also does an PREA Annual Report with data of all PREA incidents for facilities under their control. Website: https://corrections.ky.gov/About/Pages/Prison-Rape-Elimination-Act-(PREA).aspx</p> <p>Compliance for this provision was supported by interview with the Site Administrator/PREA Coordinator and a review of the PREA Annual Report.</p> <p>115.288 (d): CenterPoint policy allows for redacting material from the PREA Annual Report for publication. The redactions are limited to specific material where publication would present a clear and specific threat to the safety and security of the facility. No redactions appear in the current PREA Annual Report.</p> <p>Compliance for this provision was supported by interview with the Site Administrator/PREA Coordinator and a review of the PREA Annual Report.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is compliant with this standard requiring data review for correctional action. Corrective action is required.</p>

115.289	Data storage, publication, and destruction
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 360 358">Documents</p> <ol data-bbox="242 387 1262 645" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint PREA Annual Report 4. CenterPoint's Website: Center Point - Four River Behavioral Health 5. CenterPoint's Incident Data Facility Records <p data-bbox="242 674 504 703">Site Review Observations</p> <ol data-bbox="242 732 320 761" style="list-style-type: none"> 1. N/A <p data-bbox="242 790 347 819">Interviews</p> <ol data-bbox="242 848 659 878" style="list-style-type: none"> 1. Site Administrator/PREA Coordinator <p data-bbox="242 907 472 936">Findings (by provision)</p> <p data-bbox="242 965 1410 1023">115.289 (a): CenterPoint ensures that data collected pursuant to §115.287 are securely retained. Incident reports are retained by the Site Administrator/PREA Coordinator in a secure location.</p> <p data-bbox="242 1052 1294 1081">Compliance with this provision was verified by an interview with the Site Administrator/PREA Coordinator.</p> <p data-bbox="242 1111 1445 1169">115.289 (b): CenterPoint has annually published aggregated sexual abuse data to the public through its website or other means. Its current PREA Annual Report includes 2020 data.</p> <p data-bbox="242 1198 1319 1227">A review of the PREA Annual Report on CenterPoint's website demonstrates compliance with this provision.</p> <p data-bbox="242 1256 1399 1314">115.289 (c): CenterPoint has removed all personal identifiers from reports containing aggregated sexual abuse data published on its website.</p> <p data-bbox="242 1344 1465 1402">Compliance with this provision was verified by the Auditor's review of CenterPoint's PREA Annual Report, which contained no personal identifiers.</p> <p data-bbox="242 1431 1469 1532">115.289 (d): CenterPoint policy requires that it maintains sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection. The Auditor reviewed facility records and verified that the facility has maintained 10 years of all sexual abuse incident data after the date of its initial collection.</p> <p data-bbox="242 1561 1222 1590">Compliance with this provision was verified by the Auditor's review of incident data facility records.</p> <p data-bbox="242 1619 1461 1720">Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is compliant with all of the requirements of this standard requiring data storage, publication, and destruction. No corrective action is required.</p>

115.401	Frequency and scope of audits
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1026 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 360 358">Documents</p> <ol data-bbox="240 389 1262 586" style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint's PREA Annual Report 4. CenterPoint's Website: Center Point - Four River Behavioral Health <p data-bbox="240 618 504 645">Site Review Observations</p> <ol data-bbox="240 676 552 703" style="list-style-type: none"> 1. Tour all areas of the facility <p data-bbox="240 734 347 761">Interviews</p> <ol data-bbox="240 792 659 931" style="list-style-type: none"> 1. Informal discussion during site tour 2. Divisional Director 3. Site Administrator/PREA Coordinator <p data-bbox="240 963 472 990">Findings (by provision)</p> <p data-bbox="240 1021 1054 1048">115.401 (a): This is the CenterPoint Recovery Center for Men's third PREA Audit.</p> <p data-bbox="240 1079 1377 1137">115.401 (b): This is the second year of the current audit cycle. The Four River Behavioral Health has ensured that CenterPoint was audited during the second year of the current audit cycle.</p> <p data-bbox="240 1169 1453 1227">115.401 (h): The Auditor had access to, and the ability to observe, all areas of the audited facility without restrictions, and during all shifts.</p> <p data-bbox="240 1258 1489 1317">115.401 (i): CenterPoint provided the Auditor with copies of all requested documents and information, including electronically stored information and videos.</p> <p data-bbox="240 1348 1481 1406">115.401 (m): The Auditor was allowed to conduct private interviews with staff and residents, selected at random and without restrictions.</p> <p data-bbox="240 1438 1469 1568">115.401 (n): PREA Notice of Audit postings were provided by the Auditor and contained all of the required information. The Notices of Audit were reported posted in all living units on May 7, 2021. This was observed during the facility tour and the posting date was confirmed by interviews with residents. Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p data-bbox="240 1599 1401 1657">Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard requiring frequency and scope of audits. No corrective action is required.</p>

115.403	<p>Audit contents and findings</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire for The CenterPoint Recovery Center for Men 2. The CenterPoint Recovery Program for Men Policy: Compliance with Prison Rape Elimination Act 3. CenterPoint's PREA Annual Report 4. CenterPoint's Website: Center Point - Four River Behavioral Health <p>Site Review Observations</p> <ol style="list-style-type: none"> 1. N/A <p>Interviews</p> <ol style="list-style-type: none"> 1. Site Administrator/PREA Coordinator <p>Findings (by provision)</p> <p>115.403 (f): The Four River Behavioral Health has published all Final PREA Audit Reports on its agency website. The review period is for prior audits completed during the past three years preceding this audit. This is the CenterPoint Recovery Center for Men's third PREA Audit.</p> <p>Compliance was verified by a review of CenterPoint's website and confirmed by an interview with the Site Administrator/PREA Coordinator.</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard requiring publishing audit contents and findings. No corrective action is required.</p>
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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 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.)	na
	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.)	na
115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	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, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes

115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	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 force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes

115.217 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.217 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	yes
115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	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 residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes

115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	no
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)?	no
115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	no
115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes

115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes

115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.242 (f)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	no
115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes

115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	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 information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes

115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	no
	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?	no
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?	no
115.271 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

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

115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all-male" facility. Note: in "all-male" facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all-male" facility. Note: in "all-male" facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	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.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes