Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails

☐ **Interim** ☒ **Final**

Date of Report **November 30, 2018**

Auditor Information

Name: Mable P. Wheeler	**Email:** wheeler5p@hotmail.com
Company Name: Correctional Management & Communications Group, LLC	
Mailing Address: PO Box 5736	**City, State, Zip:** Macon, GA 31208
Telephone: 478-737-2171	**Date of Facility Visit:** October 17-October 19, 2018

Agency Information

Name of Agency: Illinois Department of Corrections		**Governing Authority or Parent Agency** *(If Applicable)*:	
Physical Address: 1301 Concordia Court, P.O. Box 19277		**City, State,** Springfield, IL 62794-9277	
Mailing Address: same		**City, State, Zip:** same	
Telephone: 217-558-2200 x 2008		**Is Agency accredited by any organization?** ☐ Yes ☒ No	
The Agency Is:	☐ Military	☐ Private for Profit	☐ Private not for Profit
☐ Municipal	☐ County	☒ State	☐ Federal

Agency mission: The Mission of the Illinois Department of Corrections is to serve justice and increase public safety by promoting positive change in offender behavior, operating successful re-entry programs and reducing victimization.

Agency Website with PREA Information: https://www.illinois.gov/idoc/Pages/default.aspx

Agency Chief Executive Officer

Name: John Baldwin	**Title:** Director
Email: john.baldwin@doc.il.gov	**Telephone:** 217-558-2200

Agency-Wide PREA Coordinator

Name: Ryan Nottingham	**Title:** Agency PREA Coordinator
Email: ryan.nottingham@illinois.gov	**Telephone:** 217-558-2200
PREA Coordinator Reports to: Chief of Programs	**Number of Compliance Managers who report to the PREA Coordinator** **31**

Facility Information

Name of Facility: Vienna Correctional Center			
Physical Address: 6695 State Route 146 East, Vienna, IL 62995			
Mailing Address (if different than above): 695 State Route 146 East, Vienna, IL 62995			
Telephone Number: 618-658-8371			
The Facility Is:	☐ Military	☐ Private for profit	☐ Private not for profit
☐ Municipal	☐ County	☒ State	☐ Federal
Facility Type:	☐ Jail	☒ Prison	
Facility Mission:			
Facility Website with PREA Information: www.illinois.gov			

Correctional Administrator/Superintendent

Name: Matthew Swalls	**Title:** Warden
Email: Matthew.Swalls@illinois.gov	**Telephone:** 618-658-8371

Facility PREA Compliance Manager

Name: Kristin Hammersley	**Title:** Social Worker IV
Email: Kristin.Hammersley@illinois.gov	**Telephone:** 618-658-8371

Facility Health Service Administrator

Name: Penny George	**Title:** Healthcare Unit Administrator
Email: Penny.George@illinois.gov	**Telephone:** 618-658-8371

Facility Characteristics

Designated Facility Capacity: 1963	**Current Population of Facility:** 1139

Number of inmates admitted to facility during the past 12 months			1277
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			29
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			440
Number of inmates on date of audit who was admitted to facility prior to August 20, 2012:			0
Age Range of Population:	**Youthful Inmates Under 18:** 0	**Adults:** 19-72	
Are youthful inmates housed separately from the adult population?	☐ Yes	☐ No	☒ 0 - NA
Number of youthful inmates housed at this facility during the past 12 months:			0
Average length of stay or time under supervision:			602.01

Facility security level/inmate custody levels:	Minimum
Number of staff currently employed by the facility who may have contact with inmates:	386
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	8
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	17

Physical Plant

Number of Buildings: VCC 46 IIP 6	**Number of Single Cell Housing Units:** 2 crisis 1 dry cell
Number of Multiple Occupancy Cell Housing Units:	6
Number of Open Bay/Dorm Housing Units:	IIP 3 dorms
Number of Segregation Cells (Administrative and Disciplinary:	6

Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):

VCC currently has 8 operational cameras, 3 in visiting room, 1 by health care unit, 1 segregation hallway and 3 outside courtyard.

Medical

Type of Medical Facility:	8 Bed observation unit
Forensic sexual assault medical exams are conducted at:	Heron Hospital Heron, IL

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	41 individual contractors 47 regular volunteers
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	2

Audit Findings

Audit Narrative

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, and 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.

Methodology:

The PREA audit of the Vienna Correctional Center operated by the Illinois Department of Corrections was conducted October 17-19, 2018 by Mable Wheeler, a certified U. S. Department of Justice PREA Auditor. The facility's last PREA audit was completed February 29, 2016. The audit was attained and assigned to the Auditor by Correctional Management and Communications Group, LLC (CMCG) located in Minneola, Florida.

Pre-Audit:

During the Pre-Audit period the facility received instructions to Post the Required PREA Audit Notice of the upcoming audit prior to the audit for confidential communications. Most of the Pre-Audit communications was handled between Auditor and Agency PREA Coordinator. Audit notice addressed privacy guideline of inmate correspondence. All PREA related mail from inmates is handled as legal mail. As of October 12, 2018, there was one communication from inmates. Inmate was interviewed. Auditor reviewed inmate investigation and it was found unsubstantiated. The Pre-Audit Questionnaire and verification of audit notice postings were received on 8/20/2018.

The Auditor completed a documentation review using the Pre-Audit Questionnaire, internet search, Agency and Facility policies and procedures, and additional documentation provided on the flash drive. Agency Mission Statement, Daily population report, schematic/layout for the facility and the last Final PREA Audit Report was also reviewed. The Agency PREA Coordinator had been previously provided a document by CMCG titled, "Information Requested to Determine Staff and Inmates Identified to be interviewed during the On-Site PREA Audit. The Illinois DOC has entered into two major Settlement Agreements as a result of class action lawsuits. The first is Rasho v Baldwin (mental health treatment availability for offenders). Holmes v Baldwin (the treatment of deaf and hard of hearing offenders). The results of the documentation review were shared with the facility prior to and at the site visit. Telephone and email communications with the facility occurred prior to the site visit.

The following documentation was requested:

- Inmate Roster
- Youthful Inmates, if any
- Inmates with Disabilities
- Inmates who are Limited English Proficient (LEP)
- LGBTI Inmates
- Inmates in segregated housing (PREA Related)
- Inmates who Reported Sexual Abuse
- Inmates who Reported Sexual Victimization During Risk Screening
- Staff Roster

- Specialized Staff
- Staff Personnel Files
- Inmate Files
- Contractors who have contact with Inmates
- Volunteers who have contact with Inmates
- Grievances made in the 12 months preceding the audit
- Allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit
- General Incident Log
- All hotline calls made during the 12 months preceding the audit
- All incidents within the past 12 months

On-Site:

The on-site audit process started on October 17, 2018. The entrance conference was attended by:

- Matt Swalls, Warden
- Dylan Luce, Assistant Warden of Programs
- USDOJ Certified PREA Auditor
- Ryan Nottingham, Agency PREA Coordinator
- John Barwick, Assistant Warden of Operations
- Kristin Hammersley, PREA Compliance Manager (newly appointed)

Welcome was given by the Facility Warden and the Auditor introduced herself and provided a brief description of her experiences, qualifications and auditing background. The purpose of site review, audit Agenda and timelines were reviewed. The Agency PREA Coordinator and Assistant Warden of Programs would serve as primary and secondary point of contact during audit. A plan was established for auditor's observation of entire physical plant which would include observation of routine activities and the opportunity to conduct informal interviews with staff and inmates. The Auditor received additional requested pre-audit information, updated inmate/staff rosters, investigations, completed background checks etc. During this time a plan was also put in place for the random selection of inmates, numbers were randomly identified. Inmates occupying beds (identified numbers) on each housing unit would be selected for interview. Random staff was selected from each shift. Targeted inmates and specialized staff lists were available. Physical locations identified for conducting interviews, provided privacy and security.

Auditor discussed process for corrective action/interim report if non-compliance is determined for any standard/standards. Also discussed was the probability of on- going communication during report writing process and time line for submission of interim/final report.

Tour: The on-site audit process started on the morning of October 17, 2018. Physical plant was toured with Assistant Warden Luce, Asst. Warden Barwick, Mental Health Dept. Head Hammersley, PREA Compliance Manager and Agency PREA Coordinator Nottingham. Auditor was able to engage in informal conversation with inmates and staff while visiting each housing unit. It was requested that when the auditor paused to speak to an inmate or staff, for staff on the floor to please step away so the conversation may remain private. During the tour, it was noted that there are eight operational video monitoring cameras on site. Cameras are digital looping and maintain data for 60 days. Camera locations are: visiting room (3), healthcare waiting room (1), segregation hallway (1), healthcare hall (1)

and (2) outside yard. Facility has mirrors strategically placed throughout facility to assist in eliminating blind spots. The auditor noted that showers/toilet areas afford inmates privacy from cross gender viewing. The auditor observed location of grievance boxes and discussed how often the grievances are collected. Inmate phones were checked to ensure they were working with a dial tone. Hot line numbers were listed and visible in each housing unit. The inmates PREA education and risk screening was observed by auditor on another day of visit. The auditor was provided unimpeded access to all parts of the facility and all secure rooms and storage areas in the facility. During the comprehensive site review, the printed notifications of the PREA site visit were observed posted in the areas previously identified in pictures sent to the Auditor, such as living units, lobby, visitation and common areas for inmates, visitors and staff. The notices contained large print on colored paper made them accessible and easy to see and read. Printed signs were observed regarding general PREA information (English and Spanish) including emergency and non-emergency numbers for assistance. Auditor also observed posted signs listing telephone number for outside advocacy agency.

A comprehensive tour of Dixon Springs Impact Incarceration Program (boot camp) was conducted. Vienna CC serves as the parent agency. PREA postings regarding agency's zero tolerance policy for sexual abuse and harassment were prominently displayed in all housing areas and throughout the facility. Audit notices with the PREA auditors' contact information was also located in the same area. During the physical site review, auditor observed the established procedures in place to ensure shower/toilet privacy and avoid opportunity for cross-gender viewing.

The auditor had sufficient opportunity to view inmate – staff interaction. During informal and formal interviews there was no know resistance of anyone speaking with Auditor. There was ample time to observe the nature and quality of inmate supervision throughout the on-site audit process, and in all instances the auditor observed appropriate respect on the part of both inmates and staff. Announcement of female staff entering unit was noted.

The PREA standards require the auditor to view certain areas to verify compliance with the standards, such as, but not limited to:

Location	Check
Facility Physical Designed	✓
Cameras Locations	✓
Observe for Blind Spots	✓
Notices of the PREA Audits Posted	✓
Holding Rooms/Cells	✓
Segregated Rooms/Cells	✓
Inmates Files in Secured Area	✓
Staff Personal Files in Secured Area	✓
PREA Information Posted English & Non-English	✓
Cameras does not have a line of sight into inmate's rooms, or the toilet and showers	✓
Staff of the opposite gender announces their present when entering living areas	✓
No Youthful Offenders	✓
No New or Renovated areas observed	✓
Inmates Program Areas	✓
Facility was orderly in appearance	✓

Grounds was manicured	✓
Reactions between inmates and staff	✓
Intake	✓
Administration Area	✓
Storage Rooms & Closets	✓
Mail Room	✓
Commissary	✓
Laundry	✓
Dining	✓
Kitchen	✓
Visitation	✓
Library	✓
Inside Recreation Area	✓
Outside Recreation Area	✓
Grievances	✓
Medical Unit	✓
Control Room Monitors	✓
Counselors/Case Mangers Work Areas	✓
Inmate Housing Units:	✓
Sally Ports	✓
Barber Shop	✓
Inmate Housing Main Facility	✓
Inmate Housing North Zone	✓
Building Trades	✓
Horticulture	✓

Facility Characteristics

Facility Demographics:

# of Full-Time Staff Reported First Day of Audit	386
# of Part-Time Staff Reported First Day of Audit	0
Types of Supervision Practiced:	Custodial Supervision
Inmate Housing: # of Housing Units	9
# of Segregation Cells (Administrative & Disciplinary)	6
Facility Inmate Designed Capacity	1963
Actual Number of Inmate Housed on the first Day	1139
Number of Youthful Inmates Housed	0
Custody/Security Level in the facility	Minimum
Gender Composition	VCC/males/Dixon Springs (males/females)
Length of Stay over 72 Hours	440

Facility Background, Physical Plant and Security Supervision:

Vienna Correctional Center is a minimum-security facility located in the extreme south-central portion of the State of Illinois, approximately 200 miles south of Springfield, IL. VCC is located in Johnson

County and DSIIP is located in Pope County. The facility does not house youthful offenders. The prison was opened November 1965. Today the facility includes Vienna Correctional Center (parent institution) and Dixon Springs Impact Incarceration Program. The operational capacity is 1,963. Total acreage is 3,500 acres with 40 acres being enclosed by fences. The two programs have a combined 50 buildings. Visitors are processed through the main entry, providing identification, signing in and going through the metal detector. Notice of Audit with the auditor's contact information and PREA signage was noted throughout facility (English and Spanish).

Vienna has six multiple occupancy housing units, six segregation cells and an eight-bed medical observation unit. DSIIP have three open bay dorms units. Inmates arrive to the facility from other facilities or directly from one of the reception centers located throughout the State. During an inmate's time in reception, they receive medical and mental health screening and examinations, are classified and receive an orientation to the IDOC. On their first day in reception, new arrivals are assessed for sexual victimization risk/vulnerability and past sexual abuse/predatory behavior. Supervision is managed by adhering to the number of inmates out of room and inmate movement and direct staff observation. Single cells are found in Healthcare unit. It was noted that staffing was sufficient to ensure a safe environment for inmates and staff. During the tour of housing units, female and male employees (Dixon) were always announced when entering areas where inmates of an opposite gender were housed.

Areas observed during site tour of physical plant included all housing units, (main facility and reception and classification unit). Additional areas observed included: administration, medical/mental health (medical & mental health staff on site 24/7), barber shop, offices, education, vocational, gym, industry, paint shop, library, chapel and dietary.

All inmates arrive to the facility through the reception and classification unit located within the secure perimeter of the facility. The average stay in the reception unit is 30-60 days. During an inmate's time in reception, they receive medical and mental health screening and examination, are classified and receive an orientation to the IDOC. Following evaluation and classification procedures, inmates are either transferred to a housing unit within Vienna CC or transported to a more appropriate correctional center within IDOC. On the first day in reception, new arrivals are assessed for sexual victimization risk and past sexual abusive behavior. Referrals to appropriate medical and mental health providers are made when necessary.

Facility Programs

The following programs are offered at Vienna Correctional Institution:

Adult Basic Education (ABE)

General Education Development (GED)

Pre-GED

VOCATIONAL: Auto Body, Auto Mechanics, Construction Occupation, Cosmetology, Custodial Maintenance, Culinary Arts, Horticulture, Barber College, Job Preparedness

VOLUNTEER SERVICES: Religious

OTHER: Chaplaincy, Community Work Crews, Volunteer Services-Religious, Life Skills, Leisure Time Activity, Library, TRAC1, Orientation, Lifestyle Redirection, Drug Education, Alcoholics Anonymous, Narcotics Anonymous, Reentry Summits, Hot Topics Presentations, Parole School.

The Illinois Department of Corrections Mission:

Serve justice in Illinois and increase public safety by promoting positive change in offender behavior, operating successful re-entry programs and reducing victimization.

Accreditation:

None

Staff Interviewed:

The Auditor conducted interviews with the following agency and facility leadership which are not counted in the totals. Below are the staff interviewed, either on-site, by telephone, or by another previous auditor.

- Agency Head (representative) Previously Interviewed by DOJ Certified Auditor Mable Wheeler
- Agency PREA Coordinator Previously Interviewed by DOJ Certified Auditor Mable Wheeler

The facility reported 453 staff members on the first day of audit, 453 full times and 0 part-time. The Auditor conducted the following specialized staff interviews during the on-site phase or by phone:

Category of Staff Interviewed	**# Interviews Conducted**
Random Staff (Total) Note: ***Selected from All Shifts***	12
Specialized Staff (Total)	26
Staff Informally Interviewed during Facility Tour	15
Staff Refused to interview	0
Total Staff	**53**
Breakdown of Specialized Staff Interviews	
✓ Warden	1
✓ Facility PREA Compliance Manager	1
✓ Intermediated- or higher-level facility staff responsible for conducting unannounced rounds to identify and deter staff sexual abuse and sexual harassment	1
✓ Incident Review Tam Member	1
✓ Line staff who supervise youthful inmates, if any	N/A
✓ Education staff who work with youthful inmates, if any	N/A
✓ Program staff who work with youthful inmates, if any	N/A
✓ Medical staff	2
✓ Mental health staff	2
✓ Non-Medical staff involved in cross-gender strip or visual searches (cross-gender strip searches are not conducted)	N/A
✓ Administrative (Human Resources) HR Staff	1
✓ SAFE and/or SANE Staff	N/A
✓ Volunteers who have contact with inmates	2
✓ Contractors who have contact with inmates	2
✓ Investigative staff – Agency Level	1
✓ Investigative staff – Facility Level	1

✓ Staff who preform screening for risk of victimization and abusiveness	2
✓ Staff who supervise inmates in segregated housing	1
✓ Designated staff member charged with monitoring retaliation	1
✓ First responders, security staff	1
✓ First responders, non-security staff	1
✓ Intake	1
✓ Grievance Coordinator	1
✓ Volunteer Coordinator	1
✓ Case Manager/Counselor	1
✓ Operations/Incidents	1
Total Specialized Staff Interviews	**26**

The auditor informally interviewed 15 staff members during site review of physical plant. Staff was selected from each of the three shifts in the random staff process. A review of the total of 53 formal and informal interviews revealed that staff at Vienna understands PREA and their roles as it relates to PREA responsibilities.

Inmate Interviewed:

The facility design capacity is 1963. The number of inmates housed during the first day of audit was 1139. The auditor conducted the following inmate interviews during the on-site phase of the audit.

Category of Inmates	**# of Interviews Conducted**
Random Inmates (Total) Note: ***Selected from all Housing Units***	25
Targeted Inmates (Total)	15
Inmates Informally Interviewed during Facility Tour	14
Inmates Refused to Interview	0
Total Inmates Interviewed	**54**
Breakdown of Targeted Inmate Interviews	
✓ Youthful Inmates	0
✓ Inmate with a Physical Disability	1
✓ Inmates who are Blind, Deaf, or Hard of Hearing	1
✓ Inmates who are LEP	1
✓ Inmates with a Cognitive Disability	2
✓ Inmates who Identify as Lesbian, Gay, or Bisexual	2
✓ Inmates who Identify as Transgender or Intersex	1
✓ Inmates in Segregated Housing for High Risk of sexual Victimization	0
✓ Inmates who Reported sexual Abuse that occurred at the Facility	3
✓ Inmates who Reported Sexual Victimization During Risk Screening	4
Total Number of Targeted Inmates Interviews	**15**

Interviewed Inmate Length of Time at Facility

Days or Months	Number of Inmates
1 Day ***to*** 31 Days	1
32 Days ***to*** 6 Months	6
7 Months ***to*** 12 Months	15
13 Months Plus	35
Total	**57**

Records Review

Name of Record	Total # of Records	# Reviewed
Initial Background Checks	427	135
Volunteers Files/Documentation/Background Checks	47	20
Personnel Records/Documentation	474	100
Training Files/Documentation/Records	427	125
Medical / Mental Health Records (Victims)/Documentation	10	10
Incident Reports	1998	10
Investigation Records (SA and SH)	10	10
Grievances (All Complaints, including SA and SH)	284	284
Grievance (Alleged SA and SH)	0	0

*Note: Of the grievances there were 2 SA and SH submitted via grievance.

Date Allegation Received	Date Allegation Occurred	Perpetrator Inmate, Staff, or Other	Abuse or Harassment	Seen Internal Affairs	Seen Medical	Seen Mental Health	PREA Checklist Complete	Investigation Finding Complete	Substantiated Unsubstantiated Unfounded Pending	PREA After-Action Checklist	PREA Review Committee Findings	Retaliation Monitoring Completed
10/16/17	ongoing	Inmate	Harassment	Yes	Yes	Yes	Yes	Yes	Substantiated	Yes	Yes	Yes
10/24/17	10/24/17	Inmate	Abuse	Yes	Yes	Yes	Yes	Yes	Unsubstantiated	Yes	Yes	No
12/27/17	12/24/17	Inmate	Harassment	Yes	Yes	Yes	Yes	Yes	Substantiated	Yes	Yes	Yes
3/21/18	3/14/18	Inmate	Harassment	Yes	Yes	Yes	Yes	Yes	Unsubstantiated	Yes	Yes	Yes
3/26/18	Wk of 3/19/18	Other	Harassment	Yes	Yes	Yes	Yes	Yes	Unsubstantiated	Yes	Yes	Yes
4/13/18	4/12/18	Staff	Harassment	Yes	Yes	Yes	Yes	Yes	Unsubstantiated	Yes	Yes	Yes
5/6/18	ongoing	Staff	Harassment	Yes	Yes	Yes	Yes	Yes	Unsubstantiated	Yes	Yes	Yes
5/15/18	4/29/18-5/8/18	Inmate	Harassment	Yes	Yes	Yes	Yes	Yes	Unfounded	Yes	No	Yes
5/26/18	5/25/18	Inmate	Harassment	Yes	Yes	Yes	Yes	Yes	Unfounded	Yes	No	Yes
5/30/18	5/25/18	Staff	Harassment	Yes	Yes	Yes	Yes	Yes	Unsubstantiated	Yes	Yes	Yes

Investigation Summary Report

	Sexual Abuse		Sexual Harassment	
	Inmate on Inmate	**Staff on Inmate**	**Inmate on Inmate**	**Staff on Inmate**
Hotline	0	0	0	**0**
Grievances	0	0	0	**0**
Reported to Staff	**1**	0	**6**	3
Anonymous, 3rd party	0	0	0	0
Reported by Staff	0	0	0	0
Total	**1**	**0**	**6**	**3**

There were 10 PREA investigations during the audit period, and a review of the files reflects timely and appropriate investigations were conducted per agency policies and applicable PREA standards.

Written communication was received from (1) inmate. Auditor spoke with inmate and reviewed investigation file. Complaint found unsubstantiated.

Summary of Audit Findings

On October 19, 2018, the Auditor conducted an exit conference with the agency and facility officials.

The following staff attended the exit conference.

- Matt Swalls, Warden
- Dylan Luce, Assistant Warden of Programs/Facility PREA Compliance Manager
- USDOJ Certified PREA Auditor
- Ryan Nottingham, Agency PREA Coordinator
- John Barwick, Assistant Warden of Operation
- Kristin Hammersley, SWIV PREA Compliance Manager

Facility officials were very open and receptive to an honest discussion of areas where PREA compliance may need to be strengthened.

There was three (3) areas noted:

1. **Note 1:** Intake staff will continue PREA discussion sessions during orientation.

2. **Note 2:** Staff will remain diligent with cross gender entry announcements

3. **Note 3:** Administration will continue to stress the need for correctional officers to closely monitor disabled inmates.

The standards are rated as exceeded, met, or not met. Most standards have between 1 – 20 provisions. To achieve compliance on any given standard, the facility must achieve 100% compliance with each provision within the standard. The auditor used the Department of Justice Final Rule for PREA Standards published in May 17, 2012. Forty-five (45) Prisons and Jails Standards were audited.

The Facility PREA Compliance Manager was very knowledgeable about the PREA requirements and the implementation of processes and systems.

Corrective actions, specific detail about deficiencies or concerns regarding findings may appear in the standard-by-standard discussions in the main body of the report. The facility corrected concerns within the 45 days before the auditor released the primary report are reviewed as compliant.

Auditor Note: *No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.*

Number of Standards Exceeded: **0**

Number of Standards Met: **45**

115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403

Number of Standards Not Met: **0**

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee

agency efforts to comply with the PREA standards in all of its facilities? ☒ Yes ☐ No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) ☒ Yes ☐ No ☐ NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Sexual Abuse and Harassment Prevention and Intervention Program Manual
- Illinois DOC Administrative Directive 04.01.301 Sexual Abuse and Harassment Prevention and Intervention Program
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- DOC Letter of Designation Agency Wide PREA Coordinator
- Illinois DOC Organization Chart
- Letter – Warden (Designation of Facility PREA Compliance Manager)
- Correctional Institution () Facility Organizational Chart

Interviews:

- Agency PREA Coordinator previously interviewed by DOJ Certified Auditor Mable Wheeler
- Warden
- Facility PREA Compliance Manager

(A Illinois DOC Policy 04.01.301 Sexual Abuse and Sexual Harassment Policy give Vienna Correctional Institution (VCC) guidelines on zero tolerance. The policy mandates a zero tolerance

toward all forms of sexual abuse and sexual harassment. The policy outlines procedures and expectations related to VCC's approach to preventing, detecting and responding to sexual abuse and sexual harassment. It is developed in compliance with the PREA standards for adult prisons and jails and includes definitions of prohibited behaviors regarding sexual assault and sexual harassment for staff and inmates.

The policy also includes sanctions for staff and inmates found to have participated in prohibited behaviors. Staff members who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance to Employee Discipline policy and Facility Rule of Conduct and subject to employment termination. Employees are subject to criminal prosecution.

Inmate, Detainee or Inmates who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with sanctions outlined in the facility's inmate handbook.

The policy includes a description of the agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates

(B) The agency employs/designates an upper level, agency wide PREA Coordinator with sufficient time and authority to develop, implements, and oversees agency efforts to comply with the PREA standards in all facilities. The agency provided additional documentation confirming the agency PREA Coordinator and authority. The agency organizational structure was provided showing the position of the agency PREA Coordinator.

(C) The facility designated a PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The facility provided documentation confirming the facility PREA Compliance Manager appointment`. The PREA Compliance Manager position is located on the Facility organizational chart showing who the position reports too.

Interview Results:

- The Warden and documentation confirmed the appointment of the Facility PREA Compliance Manager.

- Interview with the Facility PREA Compliance Manager indicated that she has a great deal of correctional experience and sufficient time and authority to coordinate the facility's effort to comply with the PREA Standards.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) ☐ Yes ☐ No ☒ NA

115.12 (b)

- 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 inmates OR the response to 115.12(a)-1 is "NO".) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- DOC Sexual Abuse and Harassment Prevention and Intervention Manual
- Safer Foundation Contract/Cycle two PREA Report (4/3/2018)
  Pre-Audit Questionnaire

Interviews:

- Agency PREA Coordinator

(A) Agency standard contract with the entities for the confinement of inmates mandates that vendors comply with all state and federal laws, specifically PREA as outlined in their contract. Vienna does not contract for the confinement of inmates.

- The number of contracts for the confinement of inmates that the facility entered into or renewed since the last PREA audit was zero (0).

- The number of contracts that did not require contractors to adopt and comply with PREA standards was zero (0).

(B) All agency contracts required the monitoring of compliance with PREA Standards.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of contracts referenced that do not require the agency to monitor contractor's compliance with PREA standard was zero (00.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answers by the Auditor to Complete the Report

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No ☐ NA

- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes

☐ No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) ☒ Yes ☐ No ☐ NA

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? ☒ Yes ☐ No

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? ☒ Yes ☐ No

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? ☒ Yes ☐ No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? ☒ Yes ☐ No

- Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No

- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews, and Observations

- Staff Plan Development Process
- Illinois DOC Administrative Directive 05.01.101 Roster Management-Development of Security Personnel
- Illinois DOC Administrative Directive 01.02.103 Inspection Tours by Administrative Staff
- DOC Program manual Staffing Plan Analysis
- Security Inspection Master Checklist
- PREA Audit: Pre-Audit Questionnaire
- Vienna Correctional Center detailed staffing plan

Interviews:

- Agency PREA Coordinator
- Warden
- Facility PREA Compliance Manager
- Announced Rounds Conducted by Higher-Level Staff
- Announced Rounds Conducted by Intermediate Level Staff

(A) The agency policy requires Vienna Correctional Institution to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate level of staffing, and where applicable, video monitoring to protect inmates against abuse.

According to interviews with management staff and documentation, when the facility calculates adequate staffing levels and determining the need for video monitoring, they consider the following as stated in the standards:

- Generally accepted detention and correctional practices;
- Judicial findings of inadequacy;
- Findings of inadequacy from Federal investigative agencies;
- Findings of inadequacy from internal or external oversight bodies;
- All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- The composition of the inmate population;
- The number and placement of supervisory staff;
- Institution programs occurring on a particular shift;
- Applicable State or local laws, regulations, or standards;
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- Other relevant factors.

Since the last PREA audit the average daily number of inmates was 1853, and the average daily number of inmates which the staffing plan was predicated was 1853.

(B) According to staff interviews and documentation, each time the staffing plan is not complied with the facility documents and justifies deviations from the staffing plan. However, there were no deviations from the staffing plan. If there were deviations from the staffing plan the facility states that it would document and list the reasons for deviating.

(C) Facility management interviewed indicated at least once every year the facility, in collaboration with the Agency PREA Coordinator review's the staffing plan to see whether adjustments are needed in:

- The staffing plan,
- Programming
- The allocation of agency/facility resources to commit to the staff plan to ensure compliance with the staffing plan.

(D) Staff interviews and documentation indicated that the facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Facility provided documentation of unannounced rounds which the rounds cover all shifts to included night and different timeframes. The policy prohibits staff from alerting other staff when unannounced rounds are conducted.

Interview Results

- Interview with the Facility PREA Compliance Manager indicated that she is consulted regarding any assessment of or adjustments to, the staffing plan.

- Interviews with facility high-level staff that conduct, and document unannounced rounds indicated that they do conduct and document unannounced rounds. Submitted documentation supported staff comments. Interviewed staff also indicated that policy prohibits staff from alerting other staff and they monitor the radio communication. All administrative staff documented entry in logbooks when entering units

- Interview with the Warden indicated that the facility has a staffing plan shift roster. When assessing adequate staffing levels and the need for additional staff they consider all the components listed in the standard.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- DOC MEMORANDUM Dated January 23, 2017 Vienna Correctional Center does not house youthful offenders

- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails)

Interviews:

- Warden
- Facility PREA Compliance Manager
- No Youthful Inmates
- Random Staff (Officers)

(A) A review of documentation and staff interviews indicated that the Vienna Correctional Institution does not housed youthful inmates.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of housing units to which youthful inmates was assigned was zero (0), and in the past 12 months the number of youthful inmates placed in the same housing unit as adults at this facility was zero (0).

(B) Interview staff also indicated that if the facility received a youthful inmate, the facility can maintain sight, sound, and physical separation between youthful inmates and adult inmates in areas outside the housing unit; and will provided direct staff supervision to the youthful inmates.

(C) The youthful inmates according to staff interviews will not be place in isolation to comply with PREA and will not be deny of daily large-muscle exercise and any legally required special education services to comply.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of youthful inmates who have been placed in isolation to separate them from adult inmates was zero (0).

Interview Results

- Interviews with the Facility Management team and a review of facility demographics/documentation reveal that Vienna Correctional Institution does not admit youthful inmates.

- Interviews with the Facility PREA Compliance Manager and randomly selected staff indicated youthful inmates are not housed in this facility. Interviewed randomly selected staff stated youthful inmates are not housed at this facility and during the audit period no youthful inmates was observed.

- The following interviews were not conducted because the facility does not house youthful inmates: Education and Program staff who work with youthful inmates, and Line staff who supervise youthful inmates.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners? ☒ Yes ☐ No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☐ Yes ☐ No ☒ NA

- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☐ Yes ☐ No ☒ NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No

- Does the facility document all cross-gender pat-down searches of female inmates? ☐ Yes ☒ No

115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No

- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? ☒ Yes ☐ No

- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No

115.15 (f)

- 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 ☐ No

- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Pre-Audit Questionnaire

- Illinois DOC 04.03.104 Program Manual, Evaluation of Offenders with Gender Identity Disorders
- AD 05.07.101 Reception and Orientation-Adult Process Security
- DOC Training Curriculum Operational Searches
- DOC PREA PSOT/PSST Training
- Cross Gender Announcement (Knock and Announce Memo dated 9/10/2018)
- Memorandum 1/26/2016 Limits to Cross-Gender Viewing
- ID.05.01.109 Searches of Persons, Vehicles and Property. doc

Interviews:

- Warden
- Facility PREA Compliance Manager
- Random Staff (Officers)
- Random Inmates

(A) Interviewed staff and documentation indicated that the facility does not conduct cross-gender strip or visual body cavity searches of inmates.

In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates were zero and the number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or was performed by non-medical staff was 0.

(B, C) Interviewed staff and documentation indicated that the facility does not house female inmates. If the facility was to receive female inmates, they would not permit cross-gender pat-down searches of female inmates absent exigent circumstances. Female inmates will not be restricted for regularly available programming or other out of cell opportunities to comply with PREA.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of pat-down searches of male inmates that was conducted by female staff was 0; and the number of pat-down searches of male inmates conducted by female staff that did not involve exigent circumstances(s) was 0.

(D) The agency has implemented policies and procedures that enable an inmate to shower, perform bodily functions, change clothing without non-medical staff of the opposite gender viewing, except in exigent circumstance or when viewing is incidental to routine cell checks. Observations of restrooms and shower during the tour confirmed inmates do have adequate privacy when using the restroom, showering and changing clothing on all housing units.

Policy and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

(E) Policy was reviewed prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the facility housed transgender and intersex inmates, the agency directs staff not to search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, the facility determines during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months the number of searches occurred was 0.

(F) Documentation review revealed that staff receives training on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive way possible, consistent with security needs. The facility provided samples of documentation to confirm staff has received and receive search training consistent with policy. The PREA Compliance Manager confirmed there had been no cross-gender strips or visual body cavity searches conducted within the audited cycle.

Interview Results:

- Forty (40) out of forty (40) staff interviewed, and facility documentation indicated that all cross-gender strip searches and cross-gender visual body cavity searches would be documented. The facility only houses male inmates.

- Ten (12) out of twelve (12) staff interviewed, staff indicated that the other officers that are working the shift announces their presence when entering a housing unit that houses inmates of the opposite gender.

- Two (2) out of fifteen (15) staff interviewed, indicated that they had not or cannot remember receiving training of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. The officers are referring to PREA information given during orientation.

- Thirty (30) out of thirty-eight (38) inmates interviewed stated that female staff announce their presence when entering the housing unit. Others stated they may not be within listening range of announcement.

- Thirty-eight (38) out of thirty-eight (38) inmates interviewed from all housing units stated that they and other inmates are never naked in full view of staff, when using the toilet, showering, or changing clothing.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?
  ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?
  ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? ☒ Yes ☐ No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- 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 ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC American Sign Language Video Remote Interpretation Procedure
- Illinois DOC Language Interpretation Procedure
- Illinois DOC Administrative Directive 04.01.301 Sexual Abuse and Harassment Prevention
- Illinois DOC Administrative Directive 04.01.105 Facility Orientation
- Illinois DOC Administrative Directive 03.01.305 Accommodations Requests or Grievance Based on Disability
- Illinois DOC Administrative Directive ADA Accommodations
- 4 Illinois Administrative Code PART 475 Americans with Disabilities Act Grievance Procedure
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency Head
- Warden
- Facility PREA Compliance Manager
- Random Staff (Officers)
- Disabled Inmate (4))
- Limited English Inmate (1))

(A) The agency has policies and procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility has taken appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Also, the facility ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. The facility will use Education Staff to assist with PREA education with inmates who have disabilities.

Vienna requires that any inmate who appears to have a condition that would limit the inmate's access to and participation in, any program or service offered by the facility, shall be handled as follows:

1. Inmates who are deaf, blind, or have other physical disabilities that significantly limit access to programs and services in the facility, may be transferred to an appropriate facility within 72 hours of admittance for assessment and classification consistent with safety and security.

2. Interview of two inmates with cognitive disabilities verified facility's attempt to provide services. Both inmates were able to verbalize options for notifying staff if assistance was needed. Auditor was advised that procedures are in place for correctional officers to remain alert to all lower functioning/disabled offenders. Cell mates are assigned as assistants when needed.

3. During assessment and classification, the inmate shall be provided with CN 101901, Americans with Disabilities Act – Notice of Rights and CN 101902, Request for Reasonable Accommodations by health services staff or a qualified sign language interpreter for the deaf or hard of hearing inmates who know sign language.

(B) The facility has taken reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Outside interpreting services are available to the inmate population as dictated by policy.

(C) The facility does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties or the investigation of the inmate's allegations. Interviewed staff indicated that they will document the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties or the investigation of the inmate's allegations was zero (0).

Interview Results:

- Interviewed staff consistently stated they would not allow, except in emergency situations, an inmate to translate or interpret for another inmate in making an allegation of sexual abuse. They indicated that Spanish speaking staff will be contacted if the need arises or use the outside services to translate.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answers by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? ☒ Yes ☐ No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? ☒ Yes ☐ No

- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? ☒ Yes ☐ No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? ☒ Yes ☐ No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ☒ Yes ☐ No

- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

- 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 03.02.100 Administrative Review of Personnel or Service Issues
- Illinois DOC Administrative Directive 03.02.106 Filling Vacancies
- Illinois DOC Administrative 01.02.107 Background Investigations
- DOC Forms:
- Administrative Review

- Contractual Services Application
- Applicant Information Sheet
- PREA Pre-Employment Self-Report
- Background Investigation Release and Consent
- Illinois DOC Administrative Directive 03.02.108 Standards of Conduct
- Pre-Audit Questionnaire

Interviews:

- Warden
- Facility PREA Compliance Manager
- Human Resources Manager

(A) Illinois DOC requires the facility not to hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor who may have contact with inmates as listed in this standard to include the following provisions as stated in the PREA standards:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; to include persons who are mentally ill or disabled or retarded or chronically ill or handicapped, or institution providing skilled nursing or intermediate or long-term care.

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

3. Has been civilly or administratively adjudicated to have engaged in the activity described in subsection 2.

(B, C) Policy requires that before hiring new employees who may have contact with inmates, the agency performs a criminal background check; and consistent with Federal, State and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of inmates or detainee sexual abuse or harassment or any resignation pending an investigation of such allegations.

In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks was 8.

(D) Policies and staff interviewed stated that the facility requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of contracts for service where criminal background record checks were conducted on all staff covered in the contract that might have contact with inmates was seventeen (17) (all completed).

(E) Illinois DOC is alerted via an on-going tracking system to ensure notification of any employee arrests.

(F) The facility staff asked applicants and employees who may have contact with inmates directly about previous misconduct; they use a form to document. The facility also imposes upon employees a continuing affirmative duty to disclose any misconduct related to PREA.

(G) IDOC policy prohibits staff from material omissions and the provision of materially false information. This may result in grounds for termination.

(H) Interviewed HR staff confirmed that the facility will provide information on employment hired and released dates and other basic information; however, they are prohibited for giving detail information on employee substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer who may request this information.

Interview Results:

- A review of the staff files and interview with the HR staff confirms that background clearances are available for all current employees.

- Interview with Facility Human Resource Staff confirmed a hiring process that is comprehensive and through. The facility performs criminal record background checks on all newly hired employees and contractor during the clearance process.

- Interview with a staff member for the VCC indicated that criminal record background checks are completed before they started working with inmates.

- Interview with Facility Human Resource Staff indicated that when a former employee applies for work at another facility, upon request from that facility that they would provide requested information if it does not violate policies or laws.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answers by the Auditor to Complete the Report

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) ☐ Yes ☐ No ☒ NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- IDOC Video Monitoring Equipment Update
- PREA Pre-Audit Questionnaire

Interviews:

- Agency PREA Coordinator
- Warden

(A) Policy requires that when designing or acquiring any new facility and in planning and substantial expansion or modification of existing facilities, the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Interviews with the Warden indicated that there was no major expansion during the past three years. If there was a major expansion, the Warden would be involved in the planning process.

(B) The facility Management Team indicated when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the plan will consider how the technology may enhance the facility's ability to protect inmates from sexual abuse.

Interview Results:

- Interviews with the Warden indicated that the facility has requested the installation of a Video Monitoring System with recording capabilities. Compliance with PREA standards was considered in making the request.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.21 (a)

- 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 ☐ No ☐ NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ 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? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (c)

- 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 ☐ No

- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No

- 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 ☐ No

- Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes ☐ No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No

- 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 ☐ No

- Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

115.21 (e)

- 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 ☐ No

- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes ☐ No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- 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 115.21(d) above.] ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 01.12.112 Preservation of Physical Evidence
- Illinois DOC Administrative Directive 01.12.120 Investigations of Unusual Incidents
- A National Protocol for Sexual Assault Medical Forensic Examinations (adult/adolescents)
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- Vienna Correctional Center Institutional Directive (Corresponding A.D. 04.01.301)
- Wexford Health Memorandum /PREA 115.21 Evidence Protocol and Forensic Medical Examinations
- Investigators Certification of Completion PREA: Investigating Sexual Abuse in a Confinement Setting
- Investigators Certification of Completion PREA Investigating Sexual Abuse in a Confinement Setting/ Advanced

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Interviews:

- Facility PREA Compliance Manager
- Medical Staff/Health Care Unit Administrator
- Mental Health Staff
- Facility Investigator
- Random Staff (Officers)
- Inmate Who Reported Sexual Abuse-NA

(A) Policy requires the agency/facility to initiate and/or conduct administrative and criminal sexual abuse investigations to include inmate-on-inmate sexual abuse or staff sexual misconduct. The facility has designated a facility Investigator. Interview with the Facility investigator indicated that policy requires and give them guidelines to follow a uniform evidence protocol.

(B) The facility utilizes the internal and external offices to conduct investigations regarding all felony related crimes to include alleged sexual violence that occurred at the facility. Both the facility and the external office follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

The protocol is appropriate and is 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. The facility does not house Youth/Adolescents.

(C) The facility offers all victims of sexual abuse access to forensic medical examinations at an outside facility, the local hospital without financial cost. Auditor verified the identified hospital provides a Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE). If one is not available, the examination is performed by a qualified medical staff.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by Facility Health Care Unit Administrator. Forensic exams are not performed on site inmate would be transferred to Heartland Regional Medical Center emergency room. The closest hospital with (SAFE/SANE) staff available is Heron Hospital, Heron, IL. This information was verified by auditor with Director of Nursing at Heron Hospital.

- The number of forensic medical exams conducted during the past 12 months was zero (0).

- The number of exams performed by SANE or SAFE during the past 12 months was zero (0).

- The number of exams performed by a qualified medical practitioner during the past 12 months was zero (0).

(D, E) The facility makes available to the victim a victim advocate. If not available to provide victim advocate services, the facility makes available (to provide services) a qualified staff member from a community-based organization or a qualified facility staff member. The facility provided documentation that confirmed a contract exists with Sexual Assault and Family Emergencies. This contract was verified by auditor with agency Director.

The victim advocate is a qualified facility staff member, or qualified community-based organization staff that accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed.

(F, G) If a PREA allegation is investigated by an outside agency, the facility request that the investigator follow the PREA requirements. The preponderance of Evidence is defined as proof by evidence that, compared with evidence opposing it, leads to the conclusions that the fact at issue is more probably true than not. Policy also states that as a result of the preponderance of the evidence, the investigator may determine whether the allegation is substantiated.

(H) The facility defines a qualified facility staff member or a qualified community- based staff member as an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination.

Interview Results:

- Documentation submitted by the facility and confirmed by the Facility PREA Compliance Manager, that the facility has contacted The Women's Center of Carbondale, IL. Center has agreed to aid VCC as needed. This was verified by auditor with Agency Director.

- Interview with the PREA Compliance Manager and documentation indicated that there have been no requested or need for a victim representative to be used at the Vienna as of August 30, 2018.

- Interviewed staff, including the facility investigator, was familiar with the evidence protocol and roles they would play as first responders. Medical staff related their role in the sexual assault would be to provide any first aid that might be needed because of injury requiring immediate medical attention. The staff stated they would "make sure the inmate victim was stable," and preserve the evidence.

- Interview with the Investigator indicated if outside agencies are responsible for investigating allegations of sexual abuse, the facility requests that the investigating agency follows the requirements of PREA. This includes the standard provision (g) 1 and 2. The policy requires the Correctional Administrator to request that outside investigative authorities conduct the investigation per PREA investigation standards.

- For victims of sexual assault, interviewed staff indicated that the facility would offer all victims access to forensic medical examinations without financial cost. Staff indicated that certified SANE/SAFE nurses are available at Heron Hospital.

- Twelve (12) out of twelve (12) interviewed staff indicated that the responsibility for conducting sexual abuse investigations is the Internal Affairs Unit.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes ☐ No

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes ☐ No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No

- Does the agency document all such referrals? ☒ Yes ☐ No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301 Sexual Abuse and Harassment Prevention and Intervention Program
- Illinois DOC Administrative Directive 01.12.101 Employee Criminal Misconduct

- Illinois DOC Administrative Directive 01.12.120 Investigations of Unusual Incidents
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- 20 Illinois Administrative Code Part 112 Internal Investigations
- NIC Certificates for Internal Affairs Staff

Interviews:

- Agency Head
- Warden
- Facility PREA Compliance Manager
- Facility Investigators
- Randomly and special category selected staff
- Randomly and targeted inmates

(A) According to interviews with the Warden, Facility PREA Compliance Manager, and the Facility Investigators, the facility ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment reported on inmate-on-inmate or staff-on-inmate misconduct.

The initial investigation begins immediately by internal affairs. The investigation unit uses a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attached copies of all documentary evidence. All investigation reports reviewed contained the (1) PREA Checklist, (2) incident report (3) report of investigation (4) PREA After-Action Checklist (5) Victim Notification of Completed PREA Investigation Findings (6) Sexual Harassment Incident Review Case (7) PREA Retaliation Monitor-Offender (8) PREA Retaliation Monitor-staff.

Interview with Facility Investigator confirmed the process for receiving an allegation and for conducting the investigation if an alleged sexual abuse was reported. He confirmed he has completed the on-line NIC Specialized Training: PREA/Conducting Sexual Abuse Investigations in Confinement Settings. The process described was comprehensive. It included the evidence the team would collect as well as statements from the alleged victim and alleged perpetrator/aggressor, statements from any witnesses. The credibility of the witness would be based on the evidence only and without any bias.

(B) The Illinois DOC has in place a policy 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. Per policy substantiated allegations of conduct that appears to be criminal are referred for prosecution. Investigations staff imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails, investigation files and staff interviews:

- During the past 12 months, the number of allegations of sexual abuse and sexual harassment that was reported was 10. (SH/substantiated/2) (SH/unsubstantiated/5) (SH/unfounded/0) (SA/unsubstantiated/1) (SA/unfounded/2).

- During the past 12 months, the number of allegations resulting in administrative investigations was 10.

- During the past 12 months, the number of allegations referred for criminal investigations was 0.

(C, D) If a separate entity is responsible for conducting criminal investigations; the publication describes the responsibilities of both the agency and the investigating entity

The agency's investigation policy is provided via the agency website and third parties are provided information on how to report any PREA allegation or complaint on line.

When there is substantial evidence that a criminal act has taken place, the case is referred to the State's Attorney for possible prosecution. There have been no referrals in the past 12 months. A review of documentation and staff interviews confirmed compliance to this standard.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? ☒ Yes ☐ No

- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? ☒ Yes ☐ No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? ☒ Yes ☐ No

- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? ☒ Yes ☐ No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? ☒ Yes ☐ No

- 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 ☐ No

- 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 ☐ No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employee understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- PREA Reporting Poster
- Illinois DOC Administrative Directive 03.03.102 Employee Training

- Illinois DOC Administrative Directive 04.01.301 Sexual Abuse and Harassment Prevention and Intervention Program
- Vienna Correctional Center Institutional Directive
- CADET/PSOT PREA TRAINING
- PREA Acknowledgement Form for Staff
- Human Resources Onboarding Checklist
- PREA Sexual Abuse and Harassment Prevention and Intervention Program Manual
- Illinois DOC FY 18 Cycle Training Schedule
- Academy Pre-Service Sexual Abuse & Harassment Prevention and Intervention
- PREA 101: Understanding Your Role in Preventing and Responding to Sexual Abuse and Harassment Power Point
- PREA Pocket Card
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jail

Interviews:

- Warden
- Facility PREA Compliance Manager
- Random Staff (Officers)

(A) The Facility has trained all employees who may have contact with inmates on the requirements stated in this standard. According to staff interviews, sexual abuse and sexual harassment training is provided in pre-service orientation training, in-service, online training and other additional training and include all requirements. Staff interviewed was able to articulate how to fulfill their responsibilities as it relates to detecting, reporting and responding to PREA issues. Most staff were strong when discussing the need to remain professional and communicating effectively with gender nonconforming inmates. The facility provided copies of the training sessions and rosters.

(B) Training is tailored to the gender of the inmates at the employee's facility. Review of documentation revealed that staff receives additional training if the staff is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa. The staff will receive this training through additional pre-service training. This facility housed only male inmates.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of staff employed by the facility, which may have contact with inmates, who was trained or retrained on the PREA requirements, was 386. Auditor reviewed training curriculum.

(C) Current employees have received training, and the facility has provided each employee with refresher training annually to ensure that all employees know the facility's current sexual abuse and sexual harassment policies and procedures. The directive requires additional training for investigators, health practitioners, and mental health staff to receive additional training specific to their areas of responsibility.

(D) The facility documents, through employee signature and electronic verification, staff understanding of the training they have received. The VCC documents staff training using the Training Acknowledgement form and a training roster, which requires the staff and instructor signature, date and job title.

- Twelve (12) out of twelve (12) interviewed random staff consistently related they receive PREA Training in a variety of ways. These include PREA Training as part of the training provided for

newly hired correctional officers and online PREA training. All staff acknowledged participating in annual cycle training which includes PREA.

- Staff also indicated refresher training is given during shift briefings and staff meetings.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? ☒ Yes ☐ No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? ☒ Yes ☐ No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Documents, Interviews, and Observations

- Volunteer Service Orientation
- Acknowledgement Form
- Illinois DOC A Guide for the Prevention and Reporting of Sexual Abuse with Offenders
- Wexford Health Training Curriculum

- Illinois DOC 04.01.301 Administrative Directive

Interviews:

- Facility PREA Compliance Manager
- Volunteer
- Contractor
- Volunteer Coordinator

(A) The Vienna CC trains all volunteers and contractors who have contact with inmates on their responsibilities under the facility's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

(B) Interviews and documentation indicated that the level and type of training provided to volunteers and contractors are based on the services they provide and the contact they have with inmates. All volunteers and contractors are notified of the facility's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report alleged incidents.

(C) The facility maintains documentation confirming that volunteers and contractors understand the training they received. Vienna CC documents volunteer and contractor training using the Training Acknowledgement form and rosters, which requires the volunteers, contractors and instructor signature and date. All volunteer/contract employees training acknowledgement forms were reviewed.

Interview Results:

- An interview with (2) volunteers and (2) contractors confirmed they had received PREA training, understood the zero-tolerance policy and how to report allegations or reports of sexual abuse or sexual harassment. An interview with the Volunteer Coordinator indicated all volunteers receive PREA orientation. Wexford Health employees receive the identical PREA training as DOC employees.

- Staff related they are given information on detection, reporting, and following-up and can ask questions during their PREA training.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answers by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No

- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? ☒ Yes ☐ No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? ☒ Yes ☐ No

115.33 (c)

- Have all inmates received such education? ☒ Yes ☐ No

- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? ☒ Yes ☐ No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? ☒ Yes ☐ No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Illinois DOC Administrative Directive 05.07.10
- Illinois ADA American Sign Language Video Remote Interpretation Procedures
- Language Interpretation Procedures
- Offender Orientation Receipt
- Orientation Manual
- Facilitator Talking Points: Inmate Sexual Abuse & Sexual Harassment Intake/Orientation Upon Transfer
- Reporting: Help Prevent Prison Sexual Violence
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager
- Intake Staff
- Staff Responsible for Inmate PREA Education
- Random Inmates

(A) Staff interviews and documentation review indicated that during the intake process, inmates receive information explaining the facility's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The facility included the following in the inmate education:

- Definition of Sexual Violence
- Specifics about the Prison Rape Elimination Act
- Reporting Sexual Violence
- Who to contact if an inmate feels vulnerable
- How to report incidents that happen to others
- Ways to avoid sexual violence

During intake, inmates are given the inmate handbook. During orientation, additional PREA related information is provided, and the video is shown. The staff conducting intake/orientation gives inmates

the opportunity to ask questions to clarify anything they do not understand. Inmate's acknowledgment statements were provided for receiving PREA information.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of inmates admitted during the past 12 months who was given PREA education information at intake was 469.

(B) The facility provides comprehensive education to inmates in person and through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. This information is provided to the inmates within 30 days.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of inmates during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to incidents within 30 days of intake was 440.

(C, D) All inmates at the Vienna CC received and had been educated on PREA. Inmates that transfer to the facility also receive the required PREA Education.

Inmate interviews confirmed that the facility provides inmate education in formats accessible to all inmates, including limited English proficient, deaf, visually impaired, disabled, as well as to inmates who have limited reading skills. Staff and inmate interviews reveal that the facility provides the PREA Education in English and Spanish, to include inmate handbooks and posters.

(E, F) The facility maintains documentation of inmate participation in the education sessions by using the Inmate Orientation checklist. The checklist requires the inmate to sign and date and is witnessed by staff signature.

In addition to providing PREA education, the facility ensures that key information is continuously and readily available and visible to inmates through posters, inmate handbooks, and other written formats.

Interview Results:

- Interviews with staff who conduct intake indicated that at intake the inmate is given a handbook. Inmate interviews and auditor observation revealed that PREA discussion is complete. Inmate signs statements confirming receiving the PREA information and that he understands it. This information includes zero tolerance and how to report incidents or suspicions of sexual abuse or sexual harassment as well as their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting these incidents.

- Interviewed intake staff indicated that during orientation all inmates current or transferred from other facilities are educated on the zero tolerance and how to report incidents or suspicion of sexual abuse or sexual harassment. In general, this information is given during the intake process; however, it is always given within the 30 days.

- Four (4) out of thirty-two (32) inmates interviewed stated when they first came to the facility, they did not receive information regarding facility rules against sexual abuse and harassment.

- Thirty-two (32) inmates was interviewed using the following statement when you came to the facility, were you told about:

  Right to not be sexually abused or sexually harassed, two (2) out of thirty-two (32) answered No.

  - How to report sexual abuse or sexual harassment, thirty-two (32) out of thirty-two (32) answer yes, they were told.

  - Your right not to be punished for reporting sexual abuse or sexual harassment, thirty (30) out of thirty-two (32) answer yes, they were told.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answers by the Auditor to Complete the Report

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- IDOC Administrative Directive 01.12.115 Institutional Investigative Assignments
- Institutional Investigator PREA Training Curriculum/Illinois
- NIC Investigator Training Certificates
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager
- Facility Investigator
- Warden

(A) In addition to the general PREA training provided to all employees, VCC ensures that its Facility investigators have received training in conducting investigations in confinement settings. Interviews and documentation reveal that specialized training was completed.

(B) The investigators completed the specialized training. Specialized training includes techniques for interviewing 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 and prosecution referral.

(C, D) The facility maintains a list of investigators having completed the required specialized training in conducting sexual abuse investigations. The facility indicated that they provided the PREA requirements for serving as a PREA investigator.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of investigators currently employed who have completed the required training was (2).

Interview Results:

- Interviews with the Facility Investigator indicated that all investigators received online training specific to conducting sexual abuse investigations in confinement settings.

- Interviews with the Facility Investigator indicated that policy requires that all allegations of sexual abuse or sexual harassment be referred for investigation with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.35 (a)

- 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? ☒ Yes ☐ No

- 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? ☒ Yes ☐ No

- 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? ☒ Yes ☐ No

- 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? ☒ Yes ☐ No

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility does not conduct forensic exams.) ☐ Yes ☐ No ☒ NA

115.35 (c)

- 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? ☒ Yes ☐ No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? ☒ Yes ☐ No

- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301 Sexual Abuse and Harassment Prevention and Intervention Program
- Vienna Correctional Center Institutional Directive
- Illinois DOC Administrative Directive 04.04.102 Suicide Prevention and Intervention Emergency Services
- Illinois DOC Staff Development and Training What Healthcare and Mental Health Providers Need to Know
- Wexford PREA and What Healthcare Providers Need to Know
- Illinois DOC FY 18 Cycle Training Schedule
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager
- Medical Staff
- Mental Health Staff

(A) Interview with Vienna CC medical/mental health staff indicated that all full- and part-time medical and mental health care practitioners who work regularly in the facilities had been trained around:

- 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 victims of sexual abuse and sexual harassment;
- How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

(B) Medical staff do not conduct forensic examinations. The Heron Hospital conducts "Sexual Assault Forensic Examinations." The hospital examiners are qualified SAFE and SANE practitioners that comply with the National Protocol for Sexual Assault Medical Forensic Examinations. Information listed on hospital website.

(C) The facility maintains documentation that medical/mental health practitioners have received the training referenced in this standard. Training rosters and staff meetings sign-in sheets was submitted to the auditor.

Interview Results:

- Interviewed healthcare staff confirmed the specialized training received by medical.
- Interviewed healthcare staff confirmed that the facility does not conduct forensic examinations.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answers by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility? ☒ Yes ☐ No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument? ☒ Yes ☐ No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) whether the inmate has a mental, physical, or developmental disability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) the age of the inmate? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) the physical build of the inmate? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) whether the inmate has previously been incarcerated? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) whether the inmate's criminal history is exclusively nonviolent? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) whether the inmate has prior convictions for sex offenses against an adult or child? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) whether the inmate has previously experienced sexual victimization? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) the inmate's own perception of vulnerability? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) whether the inmate is detained solely for civil immigration purposes? ☒ Yes ☐ No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? ☒ Yes ☐ No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? ☒ Yes ☐ No

- In assessing inmates 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 ☐ No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? ☒ Yes ☐ No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? ☒ Yes ☐ No

- Does the facility reassess an inmate's risk level when warranted due to a: Request? ☒ Yes ☐ No

- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? ☒ Yes ☐ No

- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? ☒ Yes ☐ No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? ☒ Yes ☐ No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Illinois DOC Administrative Directive 05.07.101
- Vienna Correctional Center Institutional Directive
- Screening for Potential Sexual Victimization or Sexual Abuse (DOC form 0494)
- Mental Health Evaluation (DOC form0374)

- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency PREA Coordinator
- Facility PREA Compliance Manager
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Inmates

(A)The facility assesses all inmates during intake screening to include inmates that transfer from other prisons for risk of being sexually abused
The initial intake screening is conducted at the Reception and Classification Center and thereafter at each designated facility. Inmates are screened during the admission process, which occurs within hours of inmate arrival on-site. Auditor was able to observe intake/screening process.

(B) Interviews, auditor observation of screening process and documentation revealed that intake screenings are taking place within 72 hours. Also, during intake screening, procedures require staff to review available documentation for any indication that an inmate has a history of sexually aggressive behavior. Housing assignments are made accordingly.

(C) The Illinois DOC requires Vienna CC to use the agency Screening form and the Screening for Risk of Victimization and Abusiveness as the objective screening instruments. Staff interviews for conducting Screening for Risk of Victimization and Abusiveness indicated that the facility uses the agency form and the PREA Intake Objective Screening Instrument to document this process. The PREA Intake Objective Screening Instrument has all the required criteria.

(D) Staff interviews and documentation review reveal that the Screening for Risk of Victimization and Abusiveness include the following:

- Whether the inmate has a mental, physical, or developmental disability;
- The age of the inmate;
- The physical build of the inmate;
- Whether the inmate has previously been incarcerated;
- Whether the inmates' criminal history is exclusively nonviolent;
- Whether the inmate has prior convictions for sex offenses against an adult or child;
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Whether the inmate has previously experienced sexual victimization;
- The inmate's own perception of vulnerability; and
- Whether the inmate is detained solely for civil immigration purposes.

(E, F) Agency policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmates' arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The Diagnostic Center sends the facility a computerized list of inmates vulnerable and aggravate based on the center's assessments.

Interviews and documentation reviewed indicated that reassessment is conducted timely within (30) days by mental health staff. Offender's risk level is revisited when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information.

(G, H) Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to any questions as stated in section (d).

Staff encourage inmates to respond to questions to better protect them, but inmates cannot be disciplined for refusing to answer.

(I) Agency implements appropriate controls on the dissemination within the facility of responses to questions asked under this standard to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates as descript above.

Interview Results:

- Staff interviewed indicated that the facility's PREA Compliance Manager, Intake, and Counseling have access to inmate risk assessment to protect sensitive information form exploitation.

- Staff interviewed indicated that the initial risk screening is completed during intake process.

- Staff interviewed indicated that the process for conducting the initial screening is a computerized checklist, but clarification is solicited from inmates when needed.

- Staff interviewed indicated that the staff will reassess inmate's risk level as needed due to referrals, request, an incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

- Forty (40) inmates was asked, when you first came to this facility, do you remember whether you were asked any questions like:

    - Whether you been in jail or prison before, thirty-two (32) out of forty (40) answer yes.

    - Whether you have ever been sexually abused, thirty -two (32) out of forty (40) answer yes.

    - Whether you identify with being gay, lesbian, or bisexual thirty (30) out of forty (40) answer yes.

    - Whether you think you might be in danger of sexual abuse at this facility, thirty-five (35) out of forty (40) answer yes or they cannot remember.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? ☒ Yes ☐ No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? ☒ Yes ☐ No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? ☒ Yes ☐ No

115.42 (e)

- Are each transgender or intersex inmate'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 ☐ No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for protecting lesbian, gay, bisexual, transgender, or

intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

- 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 inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

- 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 inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Vienna Correctional Center Institutional Directive
- Illinois DOC Administrative Directive 04.03.104 Evaluations of Offenders with Gender Identity Disorders
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency PREA Coordinator
- Facility PREA Compliance Manager
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Transgender and Intersex Inmates (1)
- Gay or Bisexual Inmates (3))

(A, B) The IDOC requires Vienna CC to use information from the risk screening to determine housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. Individualized determinations about how to ensure the safety of each inmate will be made according to staff interviewed.

(C) Vienna CC did have a transgender inmate during the audit period. When the facility receives a transgender and in deciding whether to assign a transgender or intersex inmate to which male living unit and in making other programming assignments, the facility will consider on a case-by-case basis whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems.

(D) Staff interviews indicated that when making placement and programming assignments for each transgender or intersex inmate, the facility will reassess them at least twice each year to review any threats to safety experienced by the inmate.

(E) Staff interviews also indicated if they were to have a transgender or intersex inmate, the inmate's views concerning his safety would be given serious consideration.

(F) Transgender and intersex inmates will be given the opportunity to shower separately from other inmates.
Interviews with (1) transgender inmate, reported feeling safe at Vienna CC and is allowed to shower separately. No special housing assignment.

(G) Interview with the Facility PREA Compliance Manager indicated that the facility would not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on identification status for protecting such inmates.

- Interviewed staff indicated that the facility is not subject to a consent decree, legal settlement, or legal judgment. Staff indicated that the facility ensures against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely by their sexual orientation, genital status, or gender identity. They are housed in the general population unless requested by the inmate for special housing for safety issues.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? ☒ Yes ☐ No

- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? ☒ Yes ☐ No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ☒ Yes ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ☒ Yes ☐ No

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ☒ Yes ☐ No

- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? ☒ Yes ☐ No

- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? ☒ Yes ☐ No

- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? ☒ Yes ☐ No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? ☒ Yes ☐ No

- Does such an assignment not ordinarily exceed a period of 30 days? ☒ Yes ☐ No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? ☒ Yes ☐ No

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Vienna Correctional Center Institutional Directive
- Illinois DOC Administrative Directive 04.01.301
- 20 Illinois Administrative Code Protective Custody
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager
- Staff Who Supervise Inmate in Segregated Housing
- Inmates Placed in Segregated Housing (None)

(A) Interviews and documentation review at Vienna CC indicated that inmates at high risk for sexual victimization are prohibited from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there are no available alternative means of separation from likely abusers. Interviews also revealed that if an assessment cannot be immediately completed, the facility will hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

(B, C, D) Staff interviews indicated that if an inmate is placed in segregated housing, they will be provided with access to programs, privileges, education, and work opportunities.

If Vienna CC assigns inmates to involuntary segregated housing, policy requires them to be housed only until an alternative means of separation from likely abusers can be arranged, and assignment does not exceed 30 days.

If the facility places an inmate in involuntary segregated housing, the facility will document as required by this provision.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The inmates at risk of sexual victimization who was held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero (0).

- The number of inmates at risk of sexual victimization who was assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero.

- From a review of case files of inmates at risk of sexual victimization who was held in involuntary segregated housing in the past 12 months, the number of case files that include both (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged reported was zero.

Interview Results:

- The Warden, in an interview, stated the use of involuntary restricted housing would be a last resort, and if used, an assessment would be conducted documenting that less restrictive means was not available.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No
- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? ☒ Yes ☐ No

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- PREA Administration Website
- Inmate Announcement – PREA External Reporting Phone Line (Talking Points)
- Illinois DOC Administrative Directive 04.01.301
- Vienna Correctional Center Administrative Directive
- PREA Poster: How to Report
- Inmate Orientation Manual (English and Spanish)
- Offender Grievance Form 0046
- Offender Request Form 0286
- Mailroom Procedures
- Memorandum of Agreement: I DOC/John Howard Associate
- PREA Acknowledgement Statement (English)
- PREA Acknowledgement Statement (Spanish)
- Office of the Prison Rape Elimination Act Administration (OPA)
- PREA Report Line

Interviews:

- Facility PREA Compliance Manager
- Random Staff (Officers)
- Random Inmates (4)
- Library Staff

(A) Interviews with staff and documentation review indicated that the facility had established procedures allowing for multiple internal ways for inmates to report sexual abuse and sexual harassment privately. The following are internal reporting ways:

- Grievance System
- Tell the Case Manager
- Chaplain

- Reporting to any staff member either verbally or in writing
- Third party reporting
- Internal Affairs
- Writing an inmate request
- Hotline
- Writing an anonymous note
- Speak with Administrative staff making rounds

(B) Interviews with staff and documentation indicated that the facility has established at least one way for inmates to report abuse or harassment to a public or private entity that is not part the agency, and that can receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. The following are external reporting ways:

- Hotline
- Third party reporting

Policy requires inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

(C, D) The agency policy mandates that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff is required to document verbal reports immediately, but always before leaving the shift. Staff can report sexual assaults and harassments privately and the agency informs staff through shift briefing, management meetings and PREA training.

Interview Results:

- An interview with the Facility PREA Compliance Manager indicated that Vienna CC is tasked with the obligation to house adult male criminal inmates. The facility does not detain inmates solely for civil immigration purposes. However, if they receive an inmate solely for civil immigration purposes, the facility will provide the inmate with information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

- Interview with the Library staff indicated that the facility has the relevant consular information and showed the auditor a copy that is available to inmates.

- Twelve (12) out twelve (12) interviewed staff indicated that they could privately report sexual abuse and sexual harassment of inmates to their supervisor or use the Hotline.

- Fifteen (15) out of fifteen (15) interviewed staff indicated that inmates can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment by using the Hotline, completing a grievance or telling a trusted staff. They also indicated that inmates could report verbally, in writing, anonymously, and from third parties.

- Interviewed inmates were asked, how would you report any sexual abuse or sexual harassment that happened to you or someone else? Thirty-eight (38) out of thirty-eight (38) inmates stated

several ways they would report, including telling a staff, using the hotline, passing a note, or filing a grievance.

- Interviewed inmates were asked can you make reports of sexual abuse or sexual harassment either in person or writing, forty (40) out of forty (40) said yes, they can report using both methods.

- Interviewed inmates were asked is there someone who does not work at this facility that you could report to about sexual abuse or sexual harassment. Thirty-five (35) out of forty inmates stated a family member.

- Interviewed inmates were asked if they have ever told anyone who works at the facility they were sexually abused or sexually harassed while in this facility. Thirty-six (36) out of thirty-eight (38) stated no.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. ☐ Yes ☒ No ☐ NA

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period

does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party file such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.114 Local Offender Grievance Procedure
- Offender Grievance Form 0046
- Title 20 Administrative Code 504
- Offender Orientation Manual
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager
- Inmate Who Reported Sexual Abuse-NA

(A) The facility has an administrative process to address inmate grievances. However, if an inmate uses the grievance process the grievance coordinator immediately submits the grievance to Internal Affairs investigators. Thus, ending the grievance process and beginning the PREA investigation process.

(B) The facility does not impose a time limit on when an Inmate may submit a grievance regarding an allegation of sexual abuse. An Inmate can submit a grievance any time regardless of when the incident is alleged to have occurred. The agency has time lines on other portion of the grievance process that does not related to sexual abuse. However, the agency does not require inmates to utilize informal grievance process or attempt to resolve alleged incident of sexual abuse with the staff member.

(C) The facility has a process in place for inmates who allege sexual abuse to submit a grievance without submitting it to staff member who is involved in the complaint or referred to a staff member subject of the complaint.

(D) When a staff receives a grievance that is PREA related it is immediately report to the PREA investigator. Thus, ends the grievance process and begin the investigation process. However, if the grievance process moves forward, the facility issues a final decision on the merits of alleging within 90 days of the initial filing.

If the facility will claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision.

(E) According to interviews third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and permitted to file requests on behalf of Inmate.

If a third-party file a request on behalf of an inmate, the facility will 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. If the inmate declines to have the request processed on his/her behalf, the facility documents the inmate's decision.

(F) The facility has established procedures for filing emergency grievances alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

According to interviews, when the facility receives an emergency grievance alleging an inmate is at substantial risk of imminent sexual abuse, the staff immediately forwards the grievance for investigations.

(G) Inmate's documentation indicated that the facility may discipline an inmate for filing a grievance related to alleged sexual abuse when the inmate filed the grievance in bad faith.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the past 12 months, the number of grievances filed that alleged sexual abuse reported was zero.

- In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed reported was zero.

- The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline reported was 0.

- The number of emergency grievances alleging substantial risk of imminent sexual abuse that was filed in the past 12 months reported was 0.

- The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions with five days reported was 0.

- In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith reported was 0.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No

- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? ☒ Yes ☐ No

- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? ☒ Yes ☐ No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Vienna Correctional Institutional Directive: Reporting
- Illinois DOC Administrative Directive o4.01.301
- Memorandum of Understanding Between IDOC and the John Howard Association Regarding PREA Act of 2003 Reporting
- Agency PREA Coordinator (0 reports received from JHA)
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager
- Random Inmates
- Inmate Who Reported Sexual Abuse

(A1) The Vienna CC provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address to the Rape Crisis Center. An interview with the Facility PREA Compliance Manager indicated that the VCC is tasked with the obligation to house adult male inmates.

(B) The Vienna CC informs inmates prior to them communicating with outside organizations that phone calls may be monitored and that reports of sexual abuse or sexual violence will be forwarded to authorities by mandatory reporting laws. Inmates receive this information in their Admission and Orientation Booklet. However, inmate interviews indicated concerns about not being able to report outside the facility confidentially on the phone without being recalled.

(C) The facility maintains memoranda of understanding (MOU) or other agreements with community services providers that can provide inmates with emotional support services related to sexual abuse.

Interview Results:

- Fifteen (15) out of thirty-eight (38) inmates interviewed stated that they did not know of the services available outside of the facility for dealing with sexual abuse if they needed it. However, the auditor did show the inmates the information was located on the living unit bulletin boards. Many inmates acknowledged paying little attention

Thirty-eight (38) out of thirty-eight (38) inmates interviewed stated that the PREA hotline numbers are free to call.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Documents, Interviews and Observations:

- Vienna CC Orientation Manual
- Pamphlet: Sexual Abuse and Custodial Sexual Misconduct
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- Illinois DOC Website

Interviews:

- Facility PREA Compliance Manager

(A) Vienna CC uses Illinois DOC website page as their method of third-party reporting of sexual abuse and sexual harassment. The public is made aware through visitor's information.

(B) Third party information is being provided to all visitors regarding their family members that are incarcerated at Vienna CC by the agency website. If at any time an inmate makes an allegation of being a victim of a sexual assault or sexual harassment and does not feel comfortable telling, writing, or using the posted hotline, the family member can make an official report of the inmate's behalf by contracting assigned staff. All sexual abuse or sexual harassment reports are done discreetly to not compromise the offender.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.61 (a)

- 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 ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No

- 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 ☐ No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does 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 ☐ No

115.61 (c)

- 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 ☐ No

- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No

115.61 (d)

- 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 ☐ No

115.61 (e)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Illinois DOC Administrative Directive 03.02.108
- DOC Retaliation Monitor Form 0498 Offender
- DOC Retaliation Monitor Form 0499 Staff
- DOC Incident Report Form
- Title 20 Illinois Administrative Code
- Vienna Correctional Center Institutional Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency PREA Coordinator
- Warden
- Facility PREA Compliance Manager
- Medical Staff
- Mental Health Staff
- Random Staff (Officers)

(A) Policy requires staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether it is part of the agency; retaliation against inmates or staff who reported the incident; as well as staff neglect or violation of responsibilities that contributed to the incident or retaliation. This policy information was confirmed by staff interviews.

(B) When sexual abuse incidents occur at Vienna CC, staff interviews indicated that the facility would report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, initially to the facility's designated investigators. Apart from reporting to designated supervisors or officials and designated state or local services agencies, policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

(C) The staff at Vienna CC understands that they are required to report sexual abuse and to inform inmates of practitioners' duty to report and the limitations of confidentiality when services are provided.

(D) The facility does not house youthful inmates under the age of 18, however, if they did house a youthful inmate and vulnerable adults would report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

(E) Interview with the PREA Compliance Manager indicated that the facility staff reports all allegations of sexual abuse and sexual harassment, including third- party and anonymous reports to the facility PREA Investigator.

Interview Results:

- All interviewed staff, contractors and volunteers indicated that the facility management required all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred at the facility; retaliation against inmates or staff who reported the incident, and any staff neglect or violation of responsibilities that may have contribute to an incident or retaliation.

- Interview with the Warden indicated that all allegations of sexual abuse and sexual harassment to include third party and anonymous sources are reported directly to Internal Affairs.

Interviews with the healthcare staff indicated that they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official immediately upon learning of the incident and they will report to required mandatory reporting agencies.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Supporting Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Vienna Correctional Center Institutional Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency Head
- Warden
- Facility PREA Compliance Manager
- Random Staff (Officers)

(A) When Vienna CC learns that an inmate is at substantial risk of imminent sexual abuse, it takes immediate action by offering the inmate to move to special housing or protection custody until the matter is resolved.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse reported was ten (10).

Interview Results:

- Interview with the Warden indicated that when they learn that an inmate is subject to a substantial risk of imminent sexual abuse, the inmate may be protected by moving to another housing unit or transferring the abuser.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? ☒ Yes ☐ No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)

- Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard.

These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Vienna Correctional Center Administrative Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency Head
- Warden
- Facility PREA Compliance Manager

(A, B, C) Vienna CC received an allegation that an inmate was sexually abused while confined at another facility. Per staff interviews, the facility notified the head of the facility or appropriate office of the agency where the alleged abuse occurred. Policy requires Warden or designated staff to provide notification to the other facility head as soon as possible but always within 72 hours after receiving the allegation with documentation of reporting.

The facility provided a process that they used when an inmate alleged sexual assault or sexual harassment at another facility.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was 0.

(D) Staff interviews indicated that when receiving allegations reported from other facilities, they would complete an incident report and send for investigations.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- During the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero (0).

Interview Results:

- Interview with the Warden indicated when the facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at their facility involving staff, they would put that staff on no-contact from inmates. If it involves an inmate, they will monitor that inmate until the investigation is completed.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ☒ Yes ☐ No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Supporting Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Illinois DOC Administrative Directive 01.12.112 Preservation of Physical Evidence
- Vienna CC Correctional Center Institutional Directive
- Illinois DOC Administrative Directive Response to Medical Emergencies
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Security Staff Who Have Acted as First Responder

- Non-Security Staff Who Acted as First Responder
- Inmate Who Reported Sexual Abuse

(A) Interviews with staff and staff training indicated when staff learn of an allegation that an inmate is sexually abused, the first security staff to respond separates the victim and abuser; preserves and protects the crime scene; and if the incident occurred within the appropriate period for the collection of physical evidence, they will request that the alleged victim not take actions that could destroy physical evidence, to include washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

(B) According to non-security staff, if they are the first responder, they will request that the alleged victim not take any actions that could destroy physical evidence and notify security staff.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of allegations that an inmate was sexually abused was 10.
- Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was 10.
- In the past 12 months, the number of allegations where staff was notified within a period that still allowed for the collection of physical evidence was zero (0).
- Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times non-security staff member was the first responder was 5.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.65 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Documents, Interviews and Observations:

- Vienna Correctional Center Institutional Directive
- Illinois DOC Administrative Directive 04.01.301
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- PREA Sexual Abuse Coordinated Response Plan

Interviews:

- Warden
- Facility PREA Compliance Manager

(A) The facility policy protocol provided guidelines for staff through a written plan to coordinate actions taken in response to an incident of sexual abuse among staff was first responders, medical and mental health practitioners, investigators, and facility leadership. The Vienna CC Institutional Policy gives details for the Inmate Sexual Abuse Coordinated Response Protocol.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.66 (a)

- 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 inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☐ No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observation

Interviews:

- Agency Head
- Agency PREA Coordinator
- Warden
- Facility PREA Compliance Manager

Staff interviews and documentation reveal that the Agency's current collective bargaining agreement does not prohibit the agency from removing alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Interviews with the Warden and the Agency PREA Coordinator indicated that the collective bargaining agreement does not hamper the agency's commitment to protect offenders through any disciplinary action of a staff member, including reprimand, suspension, demotion, discharge or otherwise discipline employees with proper cause.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No

- Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who was reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No

- 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 ☐ No

- 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 inmate disciplinary reports? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes ☐ No

- 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 ☐ No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? ☒ Yes ☐ No

- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes ☐ No

115.67 (e)

- 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 ☐ No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.03.101
- Illinois DOC Administrative Directive 03.01.301
- Illinois DOC Administrative Directive 03.01.310
- PREA Offender Retaliation Reports
- PREA Staff Retaliation Reports
- Vienna Correctional Center Administrative Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency Head
- Warden
- Facility PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Inmates Placed in Segregated Housing (None)

(A) Vienna CC prohibits retaliatory behavior by inmates or staff regarding the reporting of sexual abuse, sexual harassment or cooperation with investigations as it relates PREA related incidents and allegations. Inmate rights documentation and staff policy establish expected to conduct. The facility PREA Compliance Manager is responsible for monitoring retaliation along with supervisors to monitor inmates as it relates to PREA allegations and incidents.

(C) The facility has several protection and reporting measures, for inmates. They can utilize the "Retaliation Form" to document retaliatory acts or other PREA related concerns and issues. The process is over-seen by the facility PREA Compliance Manager who works in concert with the facility administrators and investigators to ensure privacy and policy compliance. The facility has the option to change inmate housing or transfer inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

The facility reported that there is no retaliation for this audit reporting period. However, if the facility was to have issues with retaliation, the policy will guide them on this standard. For example, for at least 90 days following a report of sexual abuse, the facility monitors the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who was reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and act promptly to remedy any retaliation. Items the facility should monitor include inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The facility continues monitoring beyond 90 days if the initial monitoring indicates a continuing need.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of times an incident of retaliation occurred in the past 12 months was 0.

Interview Results

- Interviewed staff indicated that when preventing retaliation against inmates and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations would change inmate housing or transfers an inmate, removal of alleged abusers, refer inmate to counseling for services. When preventing retaliation against staff, they would change the staff shift or change the staff work details. There were zero incidents within the last 12 months that required monitoring for 90 days.

- Interviewed staff indicated that they would monitor the inmate at least weekly. However, this process would end around 90 days.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Documents, Interviews and Observation:

- 20 Illinois Administrative Code SUBPART D: Protective Custody
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jail

Interviews:

- Warden
- Facility PREA Compliance Manager
- Staff Who Supervise Inmate in Segregated Housing
- Inmates Placed in Segregated Housing (None)

(A) The facility's use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is based on the requirements of standard 115.43. Interviews and documentation review indicated that inmates at VCC at high risk for sexual victimization are prohibited from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there are no available alternative means of separation from likely abusers. Interviews also revealed that if an assessment cannot be immediately completed, the facility will hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of inmates who allege to have suffered sexual abuse held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero (0).

- The number of inmates who allege to have suffered sexual abuse who was assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero (0).

- From a review of inmates who allege to have suffered sexual abuse who was held in involuntary segregated housing in the past 12 months, the number of case files that include both a statement of the basis for facility's concern for the inmate's safety, and the reason or reasons why alternative means of separation could not be arranged was zero (0).

Interview Results

- Interviewed staff indicated that there were no inmates during the audit period that were placed in segregation for protection from sexual abuse or after having alleged sexual abuse, however, staff did understand that if an inmate placed in segregation for protection, they would ensure that the inmate received programs, privileges, and education and work opportunities.

- Interview with the Warden indicated that policy prohibits placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing instead of other housing areas unless an assessment has determined there are no available alternative means of separation from potential abusers. It was also indicated that inmates at high risk for sexual victimization or who have alleged sexual abuse placed in involuntary segregated housing only until an alternative means of separation from likely abusers could be arranged.

- Interview with the Warden indicated that the facility management team conducts sexual abuse incident review team meetings. The team includes upper-level management and allow for input from line supervisors, investigator, medical and counseling staff. The team considers all requirements listed in the standard.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- 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 115.21(a).] ☒ Yes ☐ No ☐ NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No

- Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes ☐ No

- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? ☒ Yes ☐ No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? ☒ Yes ☐ No

- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes ☐ No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No

- 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 ☐ No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? ☒ Yes ☐ No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? ☒ Yes ☐ No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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Documents, Interviews and Observations:

- 20 Illinois Administrative Code
- Memorandum 1/19/2016 Prison Rape Elimination Act (Mark A Dallas)

- Illinois DOC Administrative Directive Investigations of Unusual Incidents
- Illinois DOC Administrative 04.01.301
- Vienna Correctional Center Institutional Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency PREA Coordinator
- Warden
- Facility PREA Compliance Manager
- Facility Investigator
- Inmate Who Reported Sexual Abuse

(A) Interviews with the Internal Affairs Investigator indicated that when they conduct investigations into allegations of sexual abuse and sexual harassment, they do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

(B) The Vienna CC uses investigators who have received special training in sexual abuse investigations. The Facility PREA Investigator has completed the online training.

(C, D, H) Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; review prior complaints and reports of sexual abuse involving the suspected perpetrator. When an allegation has been substantiated and conduct that appear to be criminal it is referred for prosecution and the facility consults with the prosecutor. Because an outside agency is investigating the facility cooperates and remains informed about the progress of the investigation.

(F, G, I) Interview staff and completed investigation reports revealed that all PREA investigations are Administrative or Criminal is documented in written format. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse and documented description of the physical and testimonial evidence, and investigative facts and findings. According to policy, the agency keeps these cases as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of substantiated allegations of conduct that appear to be criminal that was referred for prosecution since the last PREA audit was zero (0).

Interview Results:

- Interviewed staff indicated that the outside agency that investigates criminal sexual abuse keeps the facility informed of the progress of the investigation through emails and the release of the final investigation report.

- Interviewed investigator describe that direct and circumstantial evidence gathered in an investigation of an incident of sexual abuse consisted of collecting physical and DNA evidence, electronic monitoring data, interviews, and prior complaints and reports of sexual abuse.

- Interviewed investigator indicated when evidence is discovered that a prosecutable crime may have taken place; it is turned in for review than the prosecutor is consulted. According to the

investigator cases for prosecution are refer when there are substantiated allegations of conduct that appear to be criminal.

- Interviewed investigator indicated when a staff alleged to have committed sexual abuse terminates employment prior to a completed investigation into the conduct; the investigator continues the investigation until completion.

- Interviewed investigator indicated all investigations are documented. The documentation includes descriptions of physical, testimonial, and documentary evidence, as well as attached copies of documentary evidence.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.72 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

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Documents, Interviews and Observations:

- Illinois DOC Administrative Directive o4.0301
- Vienna Correctional Center Institutional Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- PREA for Investigators curriculum
- Memorandum 1/19/2016 PREA) Mark A Dallas)

Interviews:

- Warden
- Facility PREA Compliance Manager
- Facility Investigator

(A) The investigators impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Interview Results:

- Interviews with the Facility Internal Affairs Investigator indicated that the facility and agency does not impose a standard higher than a preponderance of evidence in determining whether an allegation is substantiated. Training documents verify the investigators have received the necessary specialized training in sexual abuse investigations.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility; does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? ☒ Yes ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☒ Yes ☐ No ☐ NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit? ☒ Yes ☐ No

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? ☒ Yes ☐ No

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes ☐ No

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? ☒ Yes ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Vienna Correctional Center Institutional Directive
- Illinois DOC Administrative Directive 04.01.301
- DOC Victim Notification
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Facility PREA Compliance Manager
- Facility Investigator
- Inmate Who Reported Sexual Abuse-NA

(A) Illinois DOC policy requires that following an investigation into an inmate's allegation that had suffered sexual abuse in a Facility will inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. In those cases, in which the facility did not conduct the investigation, the relevant information will be requested from the investigative agency to inform the inmate. The facility obligation to an inmate terminates if the inmate is released from the Department's custody.

(C) Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the facility will subsequently notify the inmate (unless the allegation has been determined to be unfounded or unsubstantiated) when 1) the staff member is no longer in the inmate's housing unit; 2) the staff member is no longer employed at the facility; 3) the facility learns that the staff member has been arrested on a charge related to sexual abuse within the facility; or 4) the facility learns that the staff member has been convicted on a charge related to sexual abuse within the facility. All notifications are documented. The facility's obligation to report under this standard terminates if the alleged victim is released from the Department's custody.

When VCC notifies inmates, it uses the notification of outcome of investigation letter as the documentation located on the Investigation paper work.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- The number of criminal and administrative investigations of alleged inmate sexual abuse that was completed by the agency/facility in the past 12 months was 10. Auditor reviewed completed investigation reports and found notification forms attached.

- Of the outside agency investigations of alleged sexual abuse that was completed in the past 12 months, the number of inmates alleging sexual abuse in the facility who was notified verbally or in writing of the results of the investigation was 0.

Interview Results

- Interview with Warden and Facility PREA Compliance Manager indicated that the facility notifies inmates who make an allegation of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.

- Interviewed Investigator indicated that an inmate who makes an allegation of sexual abuse must be informed as to the whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The information is shared with the facility to inform the inmate.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

115.76 (c)

- 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 ☐ No

115.76 (d)

- 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 ☐ No

- 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 ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Supporting Documents, Interviews and Observations:

- Illinois DOC Custodial Sexual Misconduct and Socialization Prevention
- Vienna Correctional Institutional Directive
- Illinois DOC Administrative Directive 04.01.301
- 20 Illinois Administrative Code/Rules of Conduct
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Facility PREA Compliance Manager

(A, B, C) Illinois DOC PREA policy, states that staff is subject to disciplinary sanctions up to and including termination for violating agency inmate sexual abuse and harassment policies. The Directive indicates that termination is the presumptive disciplinary sanction for staff that has been found to have

engaged in sexual abuse. All terminations for violations of agency inmate sexual abuse or harassment policies or resignations by staff who would have been terminated but for their resignation will be reported to law enforcement agencies unless the activity was not criminal and to any relevant licensing bodies.

Illinois DOC PREA policy and interviewed staff identifies several offenses related to sexual abuse and inappropriate or undue familiarity with an inmate who is in the jurisdiction of the Illinois DOC for which dismissal is normally the sanction.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interviews:

- In the past 12 months, the number of staff from the facility who inmates alleged violated agency sexual abuse or sexual harassment policies was 0.

- In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies was zero (0).

- In the past 12 months, the number of staff from the facility which has been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies reported was zero (0).

- In the past 12 months, the number of staff from the facility that has been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment polices reported was zero (0).

Interview Results

- Interviews with the Warden confirmed staff violating agency sexual abuse policies would be disciplined and that termination is the presumptive action and referral for prosecution where indicated.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No

- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No

- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Vienna Correctional Center Institutional Directive
- Acknowledgement Forms
- Illinois DOC Administrative Directive 04.01.301
- 20 Illinois Administrative Code/Internal Investigations
- Illinois DOC Administrative Directive 04.01.122 Volunteer Services
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Facility PREA Compliance Manager

(A B C) Illinois DOC PREA policy, identifies sanctions for contractors, vendors, and volunteers who engage in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was not criminal and to relevant licensing bodies. The facility will take appropriate remedial measures and will consider whether to prohibit further contact with inmates, in the case of any other violation of agency inmate sexual abuse or sexual harassment policies by a contractor or volunteer.

Volunteers and contractors are advised during their orientation that any contractor of a volunteer who engages in sexual abuse shall be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was not criminal and to relevant licensing bodies. This information is provided in the Handbook provided to all contractors and volunteers.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates was 0.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ☒ Yes ☐ No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ☒ Yes ☐ No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? ☒ Yes ☐ No

115.78 (f)

- 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 ☐ No

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Illinois DOC Administrative Directive 05.12.103 Administration of Discipline for Offenders Designated as Seriously Mentally Ill
- 20 Illinois Administrative Code 504 Discipline and Grievances/ Administration of Discipline
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails
- Vienna Prison Sexual Violence (PREA)

Interviews:

- Warden
- Facility PREA Compliance Manager
- Medical Staff
- Mental Health Staff

(A) The Illinois DOC has a formal inmate disciplinary process when an inmate is subject to a disciplinary sanction following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

(B) The disciplinary process allows sanctions to commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories within the facility.

(C, D) The Inmate disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed. The facility offers counseling and other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

(F) Staff interviews indicated for disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, if an investigation does not establish evidence sufficient to substantiate the allegation.

A review of the Pre-Audit Questionnaire Adult Prisons & Jails and confirmed by staff interview:

- In the 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility was one (0).

- In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that has occurred at the facility was zero (0).

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) ☒ Yes ☐ No ☐ NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? ☒ Yes ☐ No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Vienna Correctional Center Administrative Directive
- 20 Illinois Administrative Code/ Administration of Discipline for Offenders Identified as Seriously Mentally Ill
- Mental Health Screening Form: DOC 0284
- Mental Health Treatment Plan DOC 0379, Evaluation of Suicide Potential
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails)

Interviews:

- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Inmates Who Disclosed Sexual Victimization (3)

(A) Illinois DOC policy require inmates who disclosed they had experienced prior sexual victimization or prior perpetration of sexual abuse, whether it occurred in an institutional setting or the community, are to be offered a follow-up meeting with a medical or mental health practitioner within 14 days of the initial screening.

(B, C) An inmate that has previously perpetrated sexual abuse in an institutional setting or community are offered a follow up meeting with a mental health staff within 14 days of the intake screening. An inmate that experienced prior sexual victimization in jail or that occurred in an institutional setting or the community is ensured a follow up meeting with a medical or mental health staff within 14 days of the intake screening.

(D, E) Information related to sexual victimization or abusiveness that occurred in an institutional setting will be strictly limited to medical and mental health practitioner and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments, or as otherwise required by Federal, State, or local law. Mental Health practitioners will obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.

Interview Result

- Interviews with medical and mental health staff indicated inmates reporting prior sexual victimization or prior perpetration would be seen by a mental health professional within 14 days of the initial screening.

- Interviewed inmates were asked when you told someone here that you were sexually abused, did he ask if you wanted to meet with a medical or mental health care practitioner, one out of one said yes. Counseling was accepted by some and refused by others. Inmates refusing based decision on length of time since incident or having previously dealt with issues through other means.

- Medical and Mental Health Practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. The facility does not house offenders under the age of 18.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? ☒ Yes ☐ No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☒ Yes ☐ No

- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? ☒ Yes ☐ No

115.82 (d)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.01.301
- Illinois DOC Administrative Directive 04.04.100
- Evaluation of Suicide Potential
- Vienna Correctional Center Administrative Directive
- Screening DOC Form 049
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Facility PREA Compliance Manager
- Medical Staff
- Mental Health Staff
- Security Staff Who Have Acted as First Responder
- Non-Security Staff Who Acted as First Responder

(A) At Vienna CC inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Wexford Health Sources Incorporated medical staff on duty at all times. Alleged victims of sexual assault are promptly triaged at the Health Services Unit. Information is gathered, and a brief examination of physical injury will take place, taking care to preserve medical evidence. The Health Services staff person is consulted to determine if transfer to an Emergency Department is required.

(B) When health care needs exceed the level of care available at Vienna Correctional Center at the time a report of abuse is made, the security staff first responder takes preliminary steps to protect the victim. The inmate is requested to consent to a full physical examination off-site. Written consent is required before the exam, a collection of evidence or treatment can begin. The inmate is then transferred by Vienna CC to the local hospital. Rape crisis volunteers are also available if needed.

(C) Inmate victims of sexual abuse, while incarcerated, are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, by professionally accepted standards of care, where medically appropriate. The facility offers prophylactic treatment and follow-up for sexually transmitted and other communicable diseases to all victims, as appropriate.

(D) Treatment services are 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.

Interview Results

- Interviewed staff describes the following actions they would take as a first responder: Separate the alleged victim and abuser, preserving and protecting evidence on the victim, abuser, and the location where the incident occurred.

- Interviewed staff indicated that they would ask the alleged victim and abuser not to take any actions that could destroy physical evidence; washing, brushing teeth, changing clothes, urinating, defecating, drinking, eating, etc.

- Interviewed staff indicated that they would immediately notify their supervisor.

- Interviewed Health Care staff indicated that inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services.

- Interviewed Health Care staff indicated that evaluation and treatment of inmates who have been victimized will receive follow-up services, treatment plans, and when necessary, referrals for continued care after leaving the facility.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? ☒ Yes ☐ No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? ☒ Yes ☐ No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) ☐ Yes ☐ No ☒ NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) ☐ Yes ☐ No ☒ NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)

- 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 ☐ No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administrative Directive 04.021.301
- Illinois DOC Administrative Directive 04.04.101
- Vienna Correctional Center Administrative Directive
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Facility PREA Compliance Manager
- Medical Staff
- Mental Health Staff
- Inmate Who Reported Sexual Abuse-NA

(A) The Vienna CC offers medical/mental health evaluation and provides services to all inmates who have been victimized by sexual abuse.

(B) Staff interviews indicated that evaluations and services for victims include follow-up services, referrals for continued care following inmates transfer to, or placement in, other facilities, or their release from custody.

(C) The facility provides victims with medical/mental health services consistent with the community level of care.

(F) Staff interviews indicated that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

(G) Vienna CC policy requires facility treatment services provided to victims without financial cost.

(H) The facility conducts a medical/mental health evaluation of inmate-on-inmate abusers of learning of abuse history and offers treatment. If the inmate reports history of sexual abuse or abusiveness and appears at risk for victimization, security and case management are notified.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.86 (a)

- 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 ☐ No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- 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 ☐ No

- 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 ☐ No

- 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 ☐ No

- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No

- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No

- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? ☒ Yes ☐ No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- 2016 – 2017 Sexual Abuse Annual Report
- Memorandum 1/8/2016 Implementation of Sexual Abuse Incident Reviews PREA Standard 115.86
- PREA Post Incident Review (PIR) Form
- Illinois DOC Administrative Directive 04.01.301
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Facility PREA Compliance Manager
- Incident Review Team Member

(A, B, C) Illinois DOC policy requires each facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the incident has been determined to be unfounded. The review ordinarily occurs within 30 days of the conclusions of the investigation when they received the Investigation Report. The review team will include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

(D) The review team is required to consider and complete the following:

a. Whether the allegation or investigation indicates a need to change policy or practice to prevent, better detect or respond to sexual abuse;
b. Whether the incident or allegation was motivated by race, ethnicity, gang affiliation, gender identity, status or perceived status as lesbian, gay, bisexual or intersex, or was motivated or caused by other group dynamics at the facility;
c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
d. Assess the adequacy of staffing levels in that area during different shifts;
e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

(E) The facility incident review team documents all recommendations, and the facility leadership follows thru with implementation.

Interview Result

- Interview with staff confirmed they are aware of the process and was able to articulate how they would conduct a review. Staff indicated the following are minimally the staff on the incident review team: Warden, Facility PREA Compliance Manager, Investigator, Mental Health, Medical, Unit Manager and additional staff invited by the Warden. This team meets to review any incident, including any PREA related incidents.

- Interviewed staff indicated that they consider whether the incident or allegation was motivated by all the requirements listed in the standard, and if there is monitoring technology it is reviewed as a part of the review.

Standard 115.87: Data collection

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.87 (a)

- 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 ☐ No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? ☒ Yes ☐ No

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? ☒ Yes ☐ No

115.87 (d)

- 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 ☐ No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☒ Yes ☐ No ☐ NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Supporting Documents, Interviews, and Observations

- Illinois DOC Administrative Directive 04.01.301
- Vienna Quarterly PREA Report
- 2017 Annual PREA Compliance Report
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Facility PREA Compliance Manager

(A) Illinois DOC collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions as required by policy. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted. Illinois DOC aggregates the incident-based sexual abuse data at least annually and generates a comprehensive and informative

annual report. Each Illinois DOC facility is required by policy to maintain, review and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

(B) The reviewed Illinois DOC Annual Report was comprehensive and detailed and included Demographics of Illinois DOC operated facilities as well as detailed PREA Data. The agency aggregated incident-based sexual abuse data at least annually.

(C) The incident-based data collected includes, 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.

(D) The agency maintains, reviews, and collects data as needed from all available incident- based documents, including reports, investigation files, and sexual abuse incident reviews.

(E) The agency also obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

(F) Upon request, the agency will provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? ☒ Yes ☐ No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse ☒ Yes ☐ No

115.88 (c)

- 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 ☐ No

115.88 (d)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- 2017 Sexual Abuse Annual Report
- PREA Post Incident Review (PIR) Form
- IDOC Website for PREA information
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Agency Head
- Agency PREA Coordinator
- Warden
- Facility PREA Compliance Manager

(A) The Illinois DOC and the Vienna CC review data collected and aggregated under § 115.87 to assess and improve the effectiveness of the facility's sexual abuse prevention, detection, and response policies, and practices. When problem areas are identified, the agency and facility take corrective action on an ongoing basis. Interviews reveal that the Illinois DOC prepares an annual report of its findings and corrective action that includes VCC.

(B) The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

(C) The report is approved by the Illinois DOC agency head and made readily available to the public through its website.

The Illinois DOC redacts specific material from the reports that would present a clear and specific threat to the safety and security of a facility.

Interview Results:

- The Agency PREA Coordinator collects data from each facility on a monthly basis. He also maintains data on the PREA Hotline calls. The PREA Coordinator states the IDOC continues to improve the processes of how PREA allegations are reported, investigated and tracked. The IDOC has mandated an increased reporting requirement from facilities that align with the DOJ sexual assault and harassment reporting requirements. Staff interviewed indicated that the facility annual report of finding for its data review and any corrective actions is a part of the agency annual report.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained? ☒ Yes ☐ No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

Illinois DOC Administrative Directive 04.01.301
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:
- Warden
- Agency PREA Coordinator
- Facility PREA Compliance Manager

(A, B, C) Illinois DOC the parent company aggregated sexual abuse data from Vienna CC under its direct control is made readily available to the public at least annually through its website. Before making aggregates, sexual abuse data publicly available Illinois DOC removes all personal identifiers.

(D) The agency maintains sexual abuse data collected for at least ten years after the date of initial collection.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.) ☒ Yes ☐ No ☐ NA

115.401 (b)

- During each one-year period starting on August 20, 2013, 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? ☒ Yes ☐ No

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? ☒ Yes ☐ No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☒ Yes ☐ No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, inmates, and detainees? ☒ Yes ☐ No

115.401 (n)

- Was inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they was communicating with legal counsel? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations:

- Illinois DOC Administration Website
- 2017 Sexual Abuse Annual Report
- Illinois DOC Administrative Directive 04.01.301
- Audit Notices
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Jails

Interviews:

- Warden
- Agency PREA Coordinator
- Facility PREA Compliance Manager

(A, B) The agency has ensured that each facility operated by the agency is audited at least once every three years. The agency ensures that a third of each facility type is audit every year as well.

(E, F, G) The agency and/or facility demonstrated compliance with the PREA standards by submitting policies, procedures, reports, internal and external audits, and accreditations of the most recent one-year period. The auditor conducted an on-site visit that included sampling of relevant documents, other records, additional information for the 12 months' timeframe.

(H, I) During the on-site audit, the auditor was given access to all areas of the facility, observe interactions among inmates and staff; the auditor requested and received copies of relevant documents to include electronically stored information.

(J) The auditor has retained and preserved documentation to use to make audit determinations and the documentation is available to the Department of Justice upon request.

(K, M) The auditor interviewed representative samples listed below and was permitted to conduct all formal interviews privately.

- Facility Leadership
- Random Staff
- Specialized Staff
- Supervisor
- Administrators
- Random Inmates
- Targeted Inmates

(N, O) The PREA Audit Notice was posted to permit inmates to send confidential information or correspondence to the auditor. The auditor reached out to communicate with community-based advocates who have insight into relevant conditions in the facility.

Interview Results:

Interview with Vienna CC has indicated that the agency has conducted the required PREA Audits every year. The agency has ensured that at least one-third of each type is audited.

The audit resulted in the identification of issues that required remediation. Remediation commenced during the audit and continued after the on-site and culminated in the facility providing the required documentation on 10/10/2018.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeals pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there has been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ **Exceeds Standard** (*Substantially exceeds requirement of standards*)

☒ **Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ **Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Documents, Interviews and Observations

- IDO Administration Website (PREA)
- 2017 Sexual Abuse Annual Report
- PREA Audit: Pre-Audit Questionnaire Adult Prisons & Ja

Interviews:

Warden

- Facility PREA Compliance Manager

(A) This report describes in the narrative the methodology, sampling sizes, and the basis for the auditor's conclusions provide such information to the agency upon request and may provide such information to the Department of Justice.

Interview Results:

A review of the agency website indicated that the agency has made publicly available all PREA audits as required by standard.

AUDITOR CERTIFICATION

I certify that:

☒ The contents of this report are accurate to the best of my knowledge.

☒ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.[1] Auditors are not permitted to submit audit reports that have been scanned.[2] See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Mable P. Wheeler November 30, 2018

Auditor Signature **Date**

[1] See additional instructions here: https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110 .

[2] See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.